

Fill in this information to identify your case:

United States Bankruptcy Court for the:

EASTERN DISTRICT OF NORTH CAROLINA

Case number (if known)

Chapter you are filing under:

Chapter 7
 Chapter 11
 Chapter 12
 Chapter 13

Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, “Do you own a car,” the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself

About Debtor 1:

1. Your full name

Write the name that is on your government-issued picture identification (for example, your driver's license or passport).

Bring your picture identification to your meeting with the trustee.

Ashley

First name

T

Middle name

Wallace

Last name and Suffix (Sr., Jr., II, III)

About Debtor 2 (Spouse Only in a Joint Case):

Sara

First name

J

Middle name

Wallace

Last name and Suffix (Sr., Jr., II, III)

2. All other names you have used in the last 8 years

Include your married or maiden names.

3. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)

xxx-xx-0277

xxx-xx-4538

Debtor 1 **Ashley T Wallace**
Debtor 2 **Sara J Wallace**

Case number (if known) _____

About Debtor 1:**4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years** I have not used any business name or EINs.Include trade names and *doing business as* names

Business name(s) _____

EINs _____

About Debtor 2 (Spouse Only in a Joint Case): I have not used any business name or EINs.

Business name(s) _____

EINs _____

5. Where you live**10299 Croft Point Ln
Leland, NC 28451**

Number, Street, City, State & ZIP Code

Brunswick

County _____

If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.

Number, P.O. Box, Street, City, State & ZIP Code _____

If Debtor 2 lives at a different address:

Number, Street, City, State & ZIP Code _____

County _____

If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.

Number, P.O. Box, Street, City, State & ZIP Code _____

6. Why you are choosing this district to file for bankruptcy**Check one:**

Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.

I have another reason.
Explain. (See 28 U.S.C. § 1408.)

Check one:

Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.

I have another reason.
Explain. (See 28 U.S.C. § 1408.)

Debtor 1 **Ashley T Wallace**
Debtor 2 **Sara J Wallace**

Case number (if known) _____

Part 2: Tell the Court About Your Bankruptcy Case

7. **The chapter of the Bankruptcy Code you are choosing to file under** Check one. (For a brief description of each, see *Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)*). Also, go to the top of page 1 and check the appropriate box.

Chapter 7
 Chapter 11
 Chapter 12
 Chapter 13

8. **How you will pay the fee** **I will pay the entire fee when I file my petition.** Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.
 I need to pay the fee in installments. If you choose this option, sign and attach the *Application for Individuals to Pay The Filing Fee in Installments* (Official Form 103A).
 I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the *Application to Have the Chapter 7 Filing Fee Waived* (Official Form 103B) and file it with your petition.

9. **Have you filed for bankruptcy within the last 8 years?** No.
 Yes.

District _____ When _____ Case number _____
 District _____ When _____ Case number _____
 District _____ When _____ Case number _____

10. **Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?** No
 Yes.

Debtor _____ Relationship to you _____
 District _____ When _____ Case number, if known _____
 Debtor _____ Relationship to you _____
 District _____ When _____ Case number, if known _____

11. **Do you rent your residence?** No. Go to line 12.
 Yes. Has your landlord obtained an eviction judgment against you and do you want to stay in your residence?
 No. Go to line 12.
 Yes. Fill out *Initial Statement About an Eviction Judgment Against You* (Form 101A) and file it with this bankruptcy petition.

Debtor 1 **Ashley T Wallace**
Debtor 2 **Sara J Wallace**

Case number (if known) _____

Part 3: Report About Any Businesses You Own as a Sole Proprietor

12. Are you a sole proprietor of any full- or part-time business?

No. Go to Part 4.

Yes. Name and location of business _____

A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.

If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.

Name of business, if any _____

Number, Street, City, State & ZIP Code _____

Check the appropriate box to describe your business:

- Health Care Business (as defined in 11 U.S.C. § 101(27A))
- Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
- Stockbroker (as defined in 11 U.S.C. § 101(53A))
- Commodity Broker (as defined in 11 U.S.C. § 101(6))
- None of the above

13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?

For a definition of *small business debtor*, see 11 U.S.C. § 101(51D).

If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. 1116(1)(B).

No. I am not filing under Chapter 11.

No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.

Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.

Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention

14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?

For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

No.

Yes.

What is the hazard? _____

If immediate attention is needed, why is it needed? _____

Where is the property? _____

Number, Street, City, State & Zip Code _____

Debtor 1 **Ashley T Wallace**
Debtor 2 **Sara J Wallace**

Case number (if known) _____

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling**15. Tell the court whether you have received a briefing about credit counseling.**

The law requires that you receive a briefing about credit counseling before you file for bankruptcy.

You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:*You must check one:*

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):*You must check one:*

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Debtor 1 **Ashley T Wallace**
Debtor 2 **Sara J Wallace**

Case number (if known) _____

Part 6: Answer These Questions for Reporting Purposes

16. What kind of debts do you have?	16a. Are your debts primarily consumer debts? <i>Consumer debts</i> are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."		
	<input checked="" type="checkbox"/> No. Go to line 16b. <input type="checkbox"/> Yes. Go to line 17.		
16b.	Are your debts primarily business debts? <i>Business debts</i> are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.		
	<input type="checkbox"/> No. Go to line 16c. <input checked="" type="checkbox"/> Yes. Go to line 17.		
16c.	State the type of debts you owe that are not consumer debts or business debts _____		
 17. Are you filing under Chapter 7?			
Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	<input checked="" type="checkbox"/> No. I am not filing under Chapter 7. Go to line 18. <input type="checkbox"/> Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors? <input type="checkbox"/> No <input type="checkbox"/> Yes		
18. How many Creditors do you estimate that you owe?	<input checked="" type="checkbox"/> 1-49 <input type="checkbox"/> 50-99 <input type="checkbox"/> 100-199 <input type="checkbox"/> 200-999	<input type="checkbox"/> 1,000-5,000 <input type="checkbox"/> 5,001-10,000 <input type="checkbox"/> 10,001-25,000	<input type="checkbox"/> 25,001-50,000 <input type="checkbox"/> 50,001-100,000 <input type="checkbox"/> More than 100,000
19. How much do you estimate your assets to be worth?	<input type="checkbox"/> \$0 - \$50,000 <input type="checkbox"/> \$50,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$500,000 <input checked="" type="checkbox"/> \$500,001 - \$1 million	<input type="checkbox"/> \$1,000,001 - \$10 million <input type="checkbox"/> \$10,000,001 - \$50 million <input type="checkbox"/> \$50,000,001 - \$100 million <input type="checkbox"/> \$100,000,001 - \$500 million	<input type="checkbox"/> \$500,000,001 - \$1 billion <input type="checkbox"/> \$1,000,000,001 - \$10 billion <input type="checkbox"/> \$10,000,000,001 - \$50 billion <input type="checkbox"/> More than \$50 billion
20. How much do you estimate your liabilities to be?	<input type="checkbox"/> \$0 - \$50,000 <input type="checkbox"/> \$50,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$500,000 <input checked="" type="checkbox"/> \$500,001 - \$1 million	<input type="checkbox"/> \$1,000,001 - \$10 million <input type="checkbox"/> \$10,000,001 - \$50 million <input type="checkbox"/> \$50,000,001 - \$100 million <input type="checkbox"/> \$100,000,001 - \$500 million	<input type="checkbox"/> \$500,000,001 - \$1 billion <input type="checkbox"/> \$1,000,000,001 - \$10 billion <input type="checkbox"/> \$10,000,000,001 - \$50 billion <input type="checkbox"/> More than \$50 billion

Debtor 1 **Ashley T Wallace**
Debtor 2 **Sara J Wallace**

Case number (if known) _____

Part 7: Sign Below

For you

I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.

If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.

If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

/s/ Ashley T Wallace

Ashley T Wallace

Signature of Debtor 1

/s/ Sara J Wallace

Sara J Wallace

Signature of Debtor 2

Executed on **February 17, 2016**

MM / DD / YYYY

Executed on **February 17, 2016**

MM / DD / YYYY

Debtor 1 **Ashley T Wallace**
Debtor 2 **Sara J Wallace**

Case number (if known) _____

For your attorney, if you are represented by one

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

If you are not represented by an attorney, you do not need to file this page.

/s/ Jonathan E. Friesen
Signature of Attorney for Debtor

Date

February 17, 2016
MM / DD / YYYY

Jonathan E. Friesen

Printed name

Gillespie & Murphy PA

Firm name

**P.O. Drawer 888
New Bern, NC 28563**

Number, Street, City, State & ZIP Code

Contact phone **(252) 636-2225**

Email address

gmpa@lawyersforchrist.com

31535

Bar number & State

Fill in this information to identify your case:

Debtor 1	Ashley T Wallace		
	First Name	Middle Name	Last Name
Debtor 2	Sara J Wallace		
(Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	EASTERN DISTRICT OF NORTH CAROLINA		
Case number (if known)			

Check if this is an amended filing

B 104**For Individual Chapter 11 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims Against You and Are Not Insiders**

If you are an individual filing for bankruptcy under Chapter 11, you must fill out this form. If you are filing under Chapter 7, Chapter 12, or Chapter 13, do not fill out this form. Do not include claims by anyone who is an insider. Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20 percent or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Also, do not include claims by secured creditors unless the unsecured claim resulting from inadequate collateral value places the creditor among the holders of the 20 largest unsecured claims.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information.

Part 1: List the 20 Unsecured Claims in Order from Largest to Smallest. Do Not Include Claims by Insiders.

Unsecured claim			
1	What is the nature of the claim?	Credit Card	\$ \$5,528.00
As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input checked="" type="checkbox"/> None of the above apply			
Does the creditor have a lien on your property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Total claim (secured and unsecured) \$ _____ Value of security: \$ _____ Unsecured claim \$ _____			
2	What is the nature of the claim?	10299 Croft Point Ln Leland, NC 28451 Brunswick County Value: \$335,000.00 (Appraisal as of 4/2/2015, updated 9/2015)	\$ \$239,726.00
As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input checked="" type="checkbox"/> None of the above apply			

Debtor 1 **Ashley T Wallace**
Debtor 2 **Sara J Wallace**

Case number (if known) _____

Does the creditor have a lien on your property?

No

Yes. Total claim (secured and unsecured)
Value of security: \$ **\$239,726.00**
Unsecured claim \$ **\$335,000.00**
\$ **\$239,726.00**

3

BB&T
Attn: Jack Hayes
P.O. Box 1847
Wilson, NC 27894-1847

What is the nature of the claim? \$ **\$14,797.00****As of the date you file, the claim is: Check all that apply**

Contingent
 Unliquidated
 Disputed
 None of the above apply

Does the creditor have a lien on your property?

No

Yes. Total claim (secured and unsecured)
Value of security: \$ _____
Unsecured claim \$ _____

4

Brunswick Co. Tax Collec
Attn: Managing Agent
P O Box 29
Bolivia, NC 28422

What is the nature of the claim? \$ **\$2,464.41****As of the date you file, the claim is: Check all that apply**

Contingent
 Unliquidated
 Disputed
 None of the above apply

Does the creditor have a lien on your property?

No

Yes. Total claim (secured and unsecured)
Value of security: \$ _____
Unsecured claim \$ _____

5

CitiCards CBNA
Attn: Managing Agent
P O Box 6241
Sioux Falls, SD 57117

What is the nature of the claim? \$ **\$5,906.00****As of the date you file, the claim is: Check all that apply**

Contingent
 Unliquidated
 Disputed
 None of the above apply

Does the creditor have a lien on your property?

No

Yes. Total claim (secured and unsecured)
Value of security: \$ _____
Unsecured claim \$ _____

6**What is the nature of the claim? **Educational** \$ **\$8,047.00****

Debtor 1	Ashley T Wallace	Case number (if known)
Debtor 2	Sara J Wallace	
Fed Loan Serv Attn: Managing Agent P O Box 60610 Harrisburg, PA 17106		As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input checked="" type="checkbox"/> None of the above apply
Does the creditor have a lien on your property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Total claim (secured and unsecured) \$ _____ Contact _____ Contact phone _____ Value of security: _____ Unsecured claim _____		
7		What is the nature of the claim? Educational \$ \$20,500.00 As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input checked="" type="checkbox"/> None of the above apply
Does the creditor have a lien on your property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Total claim (secured and unsecured) \$ _____ Contact _____ Contact phone _____ Value of security: _____ Unsecured claim _____		
8		What is the nature of the claim? Educational \$ \$10,500.00 As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input checked="" type="checkbox"/> None of the above apply
Does the creditor have a lien on your property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Total claim (secured and unsecured) \$ _____ Contact _____ Contact phone _____ Value of security: _____ Unsecured claim _____		
9		What is the nature of the claim? 2014 Taxes \$ \$10,012.00 As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input checked="" type="checkbox"/> None of the above apply
Does the creditor have a lien on your property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Total claim (secured and unsecured) \$ _____ Contact _____		

Debtor 1	Ashley T Wallace	Case number (if known)	_____
Debtor 2	Sara J Wallace		
Contact phone		Value of security:	- \$ _____
		Unsecured claim	\$ _____
10	Navient Attn: Managing Agent P O Box 9500 Wilkes Barre, PA 18773	What is the nature of the claim?	Educational \$ \$8,753.00
As of the date you file, the claim is: Check all that apply			
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input checked="" type="checkbox"/> None of the above apply			
Does the creditor have a lien on your property?			
Contact		No	
Contact phone		Yes. Total claim (secured and unsecured)	\$ _____
		Value of security:	- \$ _____
		Unsecured claim	\$ _____
11	Nc Dept of Revenue Attn: Managing Agent P O Box 1168 Raleigh, NC 27602	What is the nature of the claim?	2014 income taxes \$ \$8,819.14
As of the date you file, the claim is: Check all that apply			
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input checked="" type="checkbox"/> None of the above apply			
Does the creditor have a lien on your property?			
Contact		No	
Contact phone		Yes. Total claim (secured and unsecured)	\$ _____
		Value of security:	- \$ _____
		Unsecured claim	\$ _____
12	Portfolio Recovery Asst Attn: Managing Agent 287 Independence Virginia Beach, VA 23462	What is the nature of the claim?	Factoring Company Account Ge Capital Retail Bank \$ \$5,383.00
As of the date you file, the claim is: Check all that apply			
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input checked="" type="checkbox"/> None of the above apply			
Does the creditor have a lien on your property?			
Contact		No	
Contact phone		Yes. Total claim (secured and unsecured)	\$ _____
		Value of security:	- \$ _____
		Unsecured claim	\$ _____
13	Sams Club / GEMB Attn: Managing Agent Po Box 103104 Roswell, GA 30076	What is the nature of the claim?	Charge Account \$ \$4,052.00
As of the date you file, the claim is: Check all that apply			
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated			

Debtor 1 **Ashley T Wallace**
 Debtor 2 **Sara J Wallace**

Case number (if known) _____

Disputed
 None of the above apply

Does the creditor have a lien on your property?

No
 Yes. Total claim (secured and unsecured) \$ _____
 Value of security: \$ _____
 Unsecured claim \$ _____

14 **What is the nature of the claim?** \$ **\$6,265.00**

Suntrust Bank
 Attn: Officer
 7455 Chancellor Dr
 Orlando, FL 32809

As of the date you file, the claim is: Check all that apply

Contingent
 Unliquidated
 Disputed
 None of the above apply

Does the creditor have a lien on your property?

No
 Yes. Total claim (secured and unsecured) \$ _____
 Value of security: \$ _____
 Unsecured claim \$ _____

15 **What is the nature of the claim?** **Rental Agreement** \$ **\$6,141.00**

Timepayment Corp Llc
 Attn: Managing Agent
 16 New England Exe Office Park
 S
 Burlington, MA 01803

As of the date you file, the claim is: Check all that apply

Contingent
 Unliquidated
 Disputed
 None of the above apply

Does the creditor have a lien on your property?

No
 Yes. Total claim (secured and unsecured) \$ _____
 Value of security: \$ _____
 Unsecured claim \$ _____

16 **What is the nature of the claim?** **Credit Card** \$ **\$8,834.00**

Usaa Savings Bank
 Attn: Officer
 P O Box 47504
 San Antonio, TX 78265

As of the date you file, the claim is: Check all that apply

Contingent
 Unliquidated
 Disputed
 None of the above apply

Does the creditor have a lien on your property?

No
 Yes. Total claim (secured and unsecured) \$ _____
 Value of security: \$ _____
 Unsecured claim \$ _____

Debtor 1 Debtor 2	Ashley T Wallace Sara J Wallace	Case number (if known)
17	What is the nature of the claim? 2013 Volkswagen Jetta 51,000 miles \$ \$2,467.00 Vin: 3VWDP7AJ5DM38725 4 Value: 13,275.00 Purchased: 2013 Miles: 51,000/ Ownership: Wife with Judith Jones	
Volkswagen Credit Inc National Bankruptcy Services 9441 Lbj Freeway, Suite 250 Dallas, TX 75241		
As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input checked="" type="checkbox"/> None of the above apply		
Does the creditor have a lien on your property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Total claim (secured and unsecured) \$ \$15,742.00 Value of security: - \$ \$13,275.00 Unsecured claim \$ \$2,467.00		
18	What is the nature of the claim? Check Credit Or Line Of Credit \$ \$10,393.00	
As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input checked="" type="checkbox"/> None of the above apply		
Does the creditor have a lien on your property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Total claim (secured and unsecured) \$ Value of security: - \$ Unsecured claim \$		
19	What is the nature of the claim? Credit Card \$ \$21,604.00	
As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input checked="" type="checkbox"/> None of the above apply		
Does the creditor have a lien on your property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Total claim (secured and unsecured) \$ Value of security: - \$ Unsecured claim \$		

Debtor 1 Debtor 2	Ashley T Wallace Sara J Wallace	Case number (if known)
20		What is the nature of the claim?
		10299 Croft Point Ln \$ \$30,253.40 Leland, NC 28451 Brunswick County Value: \$335,000.00 (Appraisal as of 4/2/2015, updated 9/2015)
	Wells Fargo Hm Mortgag Attn: Officer 8480 Stagecoach Cir Frederick, MD 21701	As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input checked="" type="checkbox"/> None of the above apply
		Does the creditor have a lien on your property?
	<input type="checkbox"/> No	
Contact	<input checked="" type="checkbox"/> Yes. Total claim (secured and unsecured)	\$ \$365,253.40
Contact phone	Value of security: Unsecured claim	- \$ \$335,000.00 \$ \$30,253.40

Part 2: Sign Below

Under penalty of perjury, I declare that the information provided in this form is true and correct.

/s/ Ashley T Wallace
Ashley T Wallace
Signature of Debtor 1

/s/ Sara J Wallace
Sara J Wallace
Signature of Debtor 2

Date February 17, 2016

Date February 17, 2016

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy,
and

Your debts are primarily consumer debts.
Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

\$245 filing fee

\$75 administrative fee

+ \$15 trustee surcharge

\$335 total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167	filing fee
+ \$550	administrative fee
\$1,717 total fee	

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

\$200	filing fee
+	\$75 administrative fee
	\$275 total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

\$235	filing fee
+	\$75 administrative fee
	\$310 total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes,
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to:
http://www.uscourts.gov/bkforms/bankruptcy_form_s.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from:
http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html.

In Alabama and North Carolina, go to:
<http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCreditAndDebtCounselors.aspx>.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

Check if this is an amended filing

Official Form 122B

Chapter 11 Statement of Your Current Monthly Income

12/15

You must file this form if you are an individual and are filing for bankruptcy under Chapter 11. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On top of any additional pages, write your name and case number (if known).

Part 1: Calculate Your Current Monthly Income

1. What is your marital and filing status? Check one only.

Not married. Fill out Column A, lines 2-11.

■ **Married and your spouse is filing with you.** Fill out both Columns A and B, lines 2-11.

Married and your spouse is NOT filing with you. Fill out Column A, lines 2-11.

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

	Column A Debtor 1	Column B Debtor 2
2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions).	\$ <u>7,349.96</u>	\$ <u>2,051.80</u>
3. Alimony and maintenance payments. Do not include payments from a spouse if Column B is filled in.	\$ <u>0.00</u>	\$ <u>0.00</u>
4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not filled in. Do not include payments you listed on line 3.	\$ <u>0.00</u>	\$ <u>0.00</u>
5. Net income from operating a business, profession, or farm	Debtor 1	Debtor 2
Gross receipts (before all deductions)	\$ <u>0.00</u>	
Ordinary and necessary operating expenses	-\$ <u>0.00</u>	
Net monthly income from a business, profession, or farm	\$ <u>0.00</u>	Copy here -> \$ <u>0.00</u>
6. Net income from rental and other real property	Debtor 1	Debtor 2
Gross receipts (before all deductions)	\$ <u>0.00</u>	
Ordinary and necessary operating expenses	-\$ <u>0.00</u>	
Net monthly income from rental or other real property	\$ <u>0.00</u>	Copy here -> \$ <u>0.00</u>

Debtor 1 **Ashley T Wallace**
Debtor 2 **Sara J Wallace**

Case number (if known) _____

7. **Interest, dividends, and royalties**
8. **Unemployment compensation**

Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here:

For you \$ **0.00**
For your spouse \$ **0.00**

<i>Column A</i> Debtor 1	<i>Column B</i> Debtor 2
\$ 0.00	\$ 0.00
\$ 0.00	\$ 0.00

\$ **0.00** \$ **0.00**

9. **Pension or retirement income.** Do not include any amount received that was a benefit under the Social Security Act.

10. **Income from all other sources not listed above.** Specify the source and amount.

Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism.

If necessary, list other sources on a separate page and put the total below.

..... \$ 0.00 \$ 0.00
Total amounts from separate pages, if any.	+ \$ 0.00

..... \$ 0.00 \$ 0.00
+ \$ 0.00	\$ 0.00

11. **Calculate your total current monthly income.**

Add lines 2 through 10 for each column.

Then add the total for Column A to the total for Column B.

\$ 7,349.96	+ \$ 2,051.80	= \$ 9,401.76
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Debtor 1
Debtor 2

Ashley T Wallace
Sara J Wallace

Case number (if known)

Part 2: Sign Below

By signing here, under penalty of perjury I declare that the information on this statement and in any attachments is true and correct.

X /s/ Ashley T Wallace

Ashley T Wallace
Signature of Debtor 1

X /s/ Sara J Wallace

Sara J Wallace
Signature of Debtor 2

Date **February 17, 2016**

MM / DD / YYYY

Date **February 17, 2016**

MM / DD / YYYY

Debtor 1 **Ashley T Wallace**
Debtor 2 **Sara J Wallace**

Case number (if known)

Current Monthly Income Details for the Debtor

Debtor Income Details:

Income for the Period **08/01/2015** to **01/31/2016**.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: **Brunswick Co Schools**

Income by Month:

6 Months Ago:	08/2015	\$4,439.17
5 Months Ago:	09/2015	\$4,439.17
4 Months Ago:	10/2015	\$4,439.17
3 Months Ago:	11/2015	\$4,439.17
2 Months Ago:	12/2015	\$5,189.17
Last Month:	01/2016	\$5,022.50
Average per month:		\$4,661.39

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: **The Wallace Group LLC**

Income by Month:

6 Months Ago:	08/2015	\$1,270.44
5 Months Ago:	09/2015	\$150.15
4 Months Ago:	10/2015	\$4,619.63
3 Months Ago:	11/2015	\$5,022.78
2 Months Ago:	12/2015	\$1,725.57
Last Month:	01/2016	\$3,342.85
Average per month:		\$2,688.57

Debtor 1
Debtor 2

Ashley T Wallace
Sara J Wallace

Case number (if known)

Current Monthly Income Details for the Debtor's Spouse

Spouse Income Details:

Income for the Period **08/01/2015 to 01/31/2016**.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: **Jungle Rapids - Summer Job**

Income by Month:

6 Months Ago:	08/2015	\$1,516.00
5 Months Ago:	09/2015	\$1,516.00
4 Months Ago:	10/2015	\$0.00
3 Months Ago:	11/2015	\$0.00
2 Months Ago:	12/2015	\$0.00
Last Month:	01/2016	\$0.00
Average per month:		\$505.33

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: **Wallace Education Holdings, LLC**

Income by Month:

6 Months Ago:	08/2015	\$1,202.16
5 Months Ago:	09/2015	\$1,455.14
4 Months Ago:	10/2015	\$681.18
3 Months Ago:	11/2015	\$1,185.64
2 Months Ago:	12/2015	\$854.35
Last Month:	01/2016	\$3,900.33
Average per month:		\$1,546.47

Fill in this information to identify your case:

Debtor 1	Ashley T Wallace		
	First Name	Middle Name	Last Name
Debtor 2	Sara J Wallace		
(Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	EASTERN DISTRICT OF NORTH CAROLINA		
Case number (if known)			

Check if this is an amended filing

Official Form 107**Statement of Financial Affairs for Individuals Filing for Bankruptcy**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Give Details About Your Marital Status and Where You Lived Before**1. What is your current marital status?**

Married
 Not married

2. During the last 3 years, have you lived anywhere other than where you live now?

No
 Yes. List all of the places you lived in the last 3 years. Do not include where you live now.

Debtor 1 Prior Address:

Dates Debtor 1
lived there

Debtor 2 Prior Address:

Dates Debtor 2
lived there**3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington and Wisconsin.)**

No
 Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).

Part 2 Explain the Sources of Your Income**4. Did you have any income from employment or from operating a business during this year or the two previous calendar years?**

Fill in the total amount of income you received from all jobs and all businesses, including part-time activities.
 If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.

No
 Yes. Fill in the details.

	Debtor 1		Debtor 2	
	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
From January 1 of current year until the date you filed for bankruptcy:	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input checked="" type="checkbox"/> Operating a business	\$8,365.35	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input checked="" type="checkbox"/> Operating a business	\$3,900.33
For last calendar year: (January 1 to December 31, 2015)	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input checked="" type="checkbox"/> Operating a business	\$53,678.57	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input checked="" type="checkbox"/> Operating a business	\$17,786.62

Debtor 1 **Ashley T Wallace**
Debtor 2 **Sara J Wallace**

Case number (if known) _____

Debtor 1		Debtor 2	
Sources of income	Gross income (before deductions and exclusions)	Sources of income	Gross income (before deductions and exclusions)
Check all that apply.		Check all that apply.	
<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input checked="" type="checkbox"/> Operating a business	\$42,995.24	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input checked="" type="checkbox"/> Operating a business	\$361.39

For the calendar year before that:
(January 1 to December 31, 2014)

5. Did you receive any other income during this year or the two previous calendar years?

Include income regardless of whether that income is taxable. Examples of *other income* are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.

List each source and the gross income from each source separately. Do not include income that you listed in line 4.

No
 Yes. Fill in the details.

Debtor 1	Gross income (before deductions and exclusions)	Debtor 2	Gross income (before deductions and exclusions)
Sources of income Describe below..		Sources of income Describe below..	

Part 3: List Certain Payments You Made Before You Filed for Bankruptcy**6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts?**

No. **Neither Debtor 1 nor Debtor 2 has primarily consumer debts.** *Consumer debts* are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,225* or more?

No. Go to line 7.
 Yes List below each creditor to whom you paid a total of \$6,225* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

* Subject to adjustment on 4/01/16 and every 3 years after that for cases filed on or after the date of adjustment.

Yes. **Debtor 1 or Debtor 2 or both have primarily consumer debts.**

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

No. Go to line 7.
 Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this payment for ...
Wells Fargo Hm Mortgag Attn: Officer 8480 Stagecoach Cir Frederick, MD 21701	Monthly	\$2,644.74	\$365,253.40	<input checked="" type="checkbox"/> Mortgage <input type="checkbox"/> Car <input type="checkbox"/> Credit Card <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Other _____

Debtor 1 **Ashley T Wallace**
Debtor 2 **Sara J Wallace**

Case number (if known) _____

7. Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider?

Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.

 No Yes. List all payments to an insider

Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
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8. Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider?

Include payments on debts guaranteed or cosigned by an insider.

 No Yes. List all payments to an insider

Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
----------------------------	------------------	-------------------	----------------------	-------------------------

Part 4: Identify Legal Actions, Repossessions, and Foreclosures**9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding?**

List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes.

 No Yes. Fill in the details.

Case title Case number	Nature of the case	Court or agency	Status of the case
Portfolio Recovery Assoc. LC vs. Ashley Wallace 14 CVD 2307	Complaint	Brunswick County District Court	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded

**Creditor moved for
Summary Judgment not
entered yet**

New Centre Drive, LLC vs. Sara Wallace
16CV000328

Civil Summons

New Hanover County Clerk

 Pending
 On appeal
 Concluded
10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied?
Check all that apply and fill in the details below. No Yes. Fill in the information below.

Creditor Name and Address	Describe the Property	Date	Value of the property
	Explain what happened		

11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? No Yes. Fill in the details.

Creditor Name and Address	Describe the action the creditor took	Date action was taken	Amount

12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No Yes

Debtor 1 **Ashley T Wallace**
Debtor 2 **Sara J Wallace**

Case number (if known) _____

Part 5: List Certain Gifts and Contributions13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? No Yes. Fill in the details for each gift.

Gifts with a total value of more than \$600 per person

Describe the gifts

Dates you gave the gifts

Value

Person to Whom You Gave the Gift and Address:

14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? No Yes. Fill in the details for each gift or contribution.

Gifts or contributions to charities that total more than \$600

Charity's Name

Address (Number, Street, City, State and ZIP Code)

Describe what you contributed

Dates you contributed

Value

Missions

Cash

in 2015

\$925.00

Part 6: List Certain Losses15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? No Yes. Fill in the details.

Describe the property you lost and how the loss occurred

Describe any insurance coverage for the loss

Date of your loss

Value of property lost

Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.

Part 7: List Certain Payments or Transfers16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition?

Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.

 No Yes. Fill in the details.

Person Who Was Paid

Address

Email or website address

Person Who Made the Payment, if Not You

Description and value of any property transferred

Date payment or transfer was made

Amount of payment

Jonathan E. Friesen

\$10,240.00 - Atty Fee

7/21/2015 -

\$10,240.00

Gillespie & Murphy, P.A.

\$1,717.00 - Filing Fee

\$12,000.00

P.O. Drawer 888

\$43.00 - Credit Report

New Bern, NC 28563

17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?

Do not include any payment or transfer that you listed on line 16.

 No Yes. Fill in the details.

Person Who Was Paid

Address

Description and value of any property transferred

Date payment or transfer was made

Amount of payment

18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?

Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not

Debtor 1 **Ashley T Wallace**
Debtor 2 **Sara J Wallace**

Case number (if known) _____

include gifts and transfers that you have already listed on this statement.

No
 Yes. Fill in the details.

Person Who Received Transfer Address	Description and value of property transferred	Describe any property or payments received or debts paid in exchange	Date transfer was made
Person's relationship to you			

19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)

No
 Yes. Fill in the details.

Name of trust	Description and value of the property transferred	Date Transfer was made
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Part 8: List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units

20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.

No
 Yes. Fill in the details.

Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
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21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?

No
 Yes. Fill in the details.

Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?
Riegelwood Fed Credit Union 183 John Riegal Rd Riegelwood, NC 28456		Adoption papers	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy

No
 Yes. Fill in the details.

Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?
--	---	-----------------------	--------------------------

Part 9: Identify Property You Hold or Control for Someone Else

23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.

No
 Yes. Fill in the details.

Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value
--	---	-----------------------	-------

Part 10: Give Details About Environmental Information

For the purpose of Part 10, the following definitions apply:

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or

Debtor 1 **Ashley T Wallace**
Debtor 2 **Sara J Wallace**

Case number (if known) _____

regulations controlling the cleanup of these substances, wastes, or material.

Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.

Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?

No

Yes. Fill in the details.

Name of site
Address (Number, Street, City, State and ZIP Code)Governmental unit
Address (Number, Street, City, State and ZIP Code)

Environmental law, if you know it

Date of notice

25. Have you notified any governmental unit of any release of hazardous material?

No

Yes. Fill in the details.

Name of site
Address (Number, Street, City, State and ZIP Code)Governmental unit
Address (Number, Street, City, State and ZIP Code)

Environmental law, if you know it

Date of notice

26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

No

Yes. Fill in the details.

Case Title
Case NumberCourt or agency
Name
Address (Number, Street, City, State and ZIP Code)

Nature of the case

Status of the case

Part 11: Give Details About Your Business or Connections to Any Business

27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?

A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time

A member of a limited liability company (LLC) or limited liability partnership (LLP)

A partner in a partnership

An officer, director, or managing executive of a corporation

An owner of at least 5% of the voting or equity securities of a corporation

No. None of the above applies. Go to Part 12.

Yes. Check all that apply above and fill in the details below for each business.

Business Name
Address
(Number, Street, City, State and ZIP Code)

Describe the nature of the business

Employer Identification number
Do not include Social Security number or ITIN.

The Wallaby Group, LLC

Name of accountant or bookkeeper

Dates business existed

EIN:

From-To 1/25/2013 to present

Wallace Education Holdings, LLC

D/b/a Point Institute, private K-12 school
Female debtor 100% Member

EIN:

From-To 6/30/2006 to present

Debtor 1 **Ashley T Wallace**
Debtor 2 **Sara J Wallace**

Case number (if known) _____

28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.

No

Yes. Fill in the details below.

Name

Address

(Number, Street, City, State and ZIP Code)

Date Issued

Debtor 1 **Ashley T Wallace**
Debtor 2 **Sara J Wallace**

Case number (if known) _____

Part 12: Sign Below

I have read the answers on this *Statement of Financial Affairs* and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both.
18 U.S.C. §§ 152, 1341, 1519, and 3571.

/s/ Ashley T Wallace
Ashley T Wallace
Signature of Debtor 1

/s/ Sara J Wallace
Sara J Wallace
Signature of Debtor 2

Date February 17, 2016

Date February 17, 2016

Did you attach additional pages to *Your Statement of Financial Affairs for Individuals Filing for Bankruptcy* (Official Form 107)?

No
 Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

No
 Yes. Name of Person _____. Attach the *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).

Fill in this information to identify your case and this filing:

Debtor 1	Ashley T Wallace	
	First Name	Middle Name
Debtor 2	Sara J Wallace	
(Spouse, if filing)	First Name	Middle Name
United States Bankruptcy Court for the: EASTERN DISTRICT OF NORTH CAROLINA		
Case number		

Check if this is an amended filing

Official Form 106A/B**Schedule A/B: Property**

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In**1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property?**

No. Go to Part 2.
 Yes. Where is the property?

1.1

10299 Croft Point Ln

Street address, if available, or other description

Leland	NC	28451-0000
City	State	ZIP Code

Brunswick

County

What is the property? Check all that apply

Single-family home
 Duplex or multi-unit building
 Condominium or cooperative
 Manufactured or mobile home
 Land
 Investment property
 Timeshare
 Other _____

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property?	Current value of the portion you own?
\$335,000.00	\$335,000.00

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

Tenants by the Entirety

Check if this is community property
(see instructions)

Who has an interest in the property? Check one

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another

Other information you wish to add about this item, such as local property identification number:

Value: \$335,000.00 (Appraisal as of 4/2/2015, updated 9/2015)

Purchased: 4/2003

Price: \$365,000.00

Tax value: 453,550.00

Ownership: T By E

1st Monthly Contractual payment: \$2,644.74 P/I/E Due Date: 1st

2nd is Equity Line

Debtor 1 **Ashley T Wallace**
Debtor 2 **Sara J Wallace**

Case number (if known) _____

3.2 Make: **GMC**
Model: **Yukon**
Year: **2005**
Approximate mileage: **228,000**
Other information:**Vin:** 1GKFK16Z35J148858
Value: 11,800.00
Purchased: 8/2006
Price: \$28,000.00
Miles: 228,000/
Ownership: Wife**Who has an interest in the property?** Check one
 Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and anotherDo not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.**Current value of the entire property?** _____ **Current value of the portion you own?** _____ **Check if this is community property**
(see instructions)**\$11,800.00****\$11,800.00**3.3 Make: **Toyota**
Model: **LandCruiser**
Year: **1996**
Approximate mileage: **220,000**
Other information:**Vin:** JT3HJ85J0T0123757
Value: 7,550.00
Purchased: 2004
Price: 11,500.00
Miles: 220,000/
Ownership: Wife**Who has an interest in the property?** Check one
 Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and anotherDo not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.**Current value of the entire property?** _____ **Current value of the portion you own?** _____ **Check if this is community property**
(see instructions)**\$7,550.00****\$7,550.00**3.4 Make: **Porsche**
Model: **944**
Year: **1986**
Approximate mileage: **210,000**
Other information:**Vin:** WP0AA0949GN452632
Value: 1000.00
Purchased: 2000
Price: Inherited
Miles: 210,000/
Ownership: Husband
Note: Car does not run; no tags not insured; poor condition**Who has an interest in the property?** Check one
 Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and anotherDo not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.**Current value of the entire property?** _____ **Current value of the portion you own?** _____ **Check if this is community property**
(see instructions)**\$1,000.00****\$1,000.00****4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories**

Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories

 No
 Yes

4.1 Make: _____

Who has an interest in the property? Check oneDo not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.**Current value of the entire property?** _____ **Current value of the portion you own?** _____**2001 18' Grady White 180 Sportsman, 2002 Loadrite Trailer & 130 HP Yamaha Motor**
Value: 8,600.00
Purchased: 2009
Price: 11,500.00
Ownership: Husband Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this is community property
(see instructions)**\$8,600.00****\$8,600.00**

Debtor 1 **Ashley T Wallace**
Debtor 2 **Sara J Wallace**

Case number (if known)

5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for
..... pages you have attached for Part 2. Write that number here.....=>

\$35,587.50

Part 3: Describe Your Personal and Household Items

Do you own or have any legal or equitable interest in any of the following items?

Current value of the
portion you own?
Do not deduct secured
claims or exemptions.**6. Household goods and furnishings**

Examples: Major appliances, furniture, linens, china, kitchenware

 No Yes. Describe.....**Household goods, furnishings & electronics**

\$2,500.00

**Any and all miscellaneous household goods and personal items
listed herein.**

\$3,500.00

7. Electronics

Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

 No Yes. Describe.....**8. Collectibles of value**

Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles

 No Yes. Describe.....**9. Equipment for sports and hobbies**

Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments

 No Yes. Describe.....**10. Firearms**

Examples: Pistols, rifles, shotguns, ammunition, and related equipment

 No Yes. Describe.....**Pistol & 2 rifles**

\$800.00

11. Clothes

Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories

 No Yes. Describe.....**Clothing & personal items**

\$500.00

12. Jewelry

Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver

 No Yes. Describe.....**Rings**

\$3,500.00

Debtor 1 **Ashley T Wallace**
Debtor 2 **Sara J Wallace**

Case number (if known) _____

13. Non-farm animals

Examples: Dogs, cats, birds, horses

 No Yes. Describe.....

Pets No Value	\$0.00
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14. Any other personal and household items you did not already list, including any health aids you did not list No Yes. Give specific information.....

15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here

\$10,800.00**Part 4: Describe Your Financial Assets**

Do you own or have any legal or equitable interest in any of the following?

Current value of the portion you own?
Do not deduct secured claims or exemptions.**16. Cash**

Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition

 No Yes.....**17. Deposits of money**

Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.

 No Yes.....

Institution name:

17.1.	Riegelwood Federal Credit Union - checking	\$560.55
17.2.	E-Trade Investmant Account	\$5,066.26
17.3.	PayPal account Zero balance	\$0.00
17.4. Checking	Woodforest Account no.: 1875339176 Walmart, 1114 NewPointe Blvd Leland, NC 28451	\$54.88

18. Bonds, mutual funds, or publicly traded stocks

Examples: Bond funds, investment accounts with brokerage firms, money market accounts

 No Yes.....

Institution or issuer name:

19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture No Yes. Give specific information about them.....

Name of entity:

% of ownership:

The Wallaby Group, LLC	100%	%	\$4,918.51
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Debtor 1 **Ashley T Wallace**
Debtor 2 **Sara J Wallace**

Case number (if known) _____

Wallace Educations Holdings, LLC No Assets. No value	100%	%	\$0.00
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20. Government and corporate bonds and other negotiable and non-negotiable instruments

Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders.
Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them.

 No Yes. Give specific information about them

Issuer name: _____

21. Retirement or pension accounts

Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans

 No Yes. List each account separately.

Type of account: _____

Institution name: _____

IRA**Morgan Stanley IRA****\$6,165.81****22. Security deposits and prepayments**

Your share of all unused deposits you have made so that you may continue service or use from a company

Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others

 No Yes.

Institution name or individual: _____

23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) No Yes..... Issuer name and description. _____**24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.**

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

 No Yes.....

Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): _____

25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit No Yes. Give specific information about them...**26. Patents, copyrights, trademarks, trade secrets, and other intellectual property**

Examples: Internet domain names, websites, proceeds from royalties and licensing agreements

 No Yes. Give specific information about them...**27. Licenses, franchises, and other general intangibles**

Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

 No Yes. Give specific information about them...**Money or property owed to you?****Current value of the portion you own?**

Do not deduct secured claims or exemptions.

28. Tax refunds owed to you No Yes. Give specific information about them, including whether you already filed the returns and the tax years.....**29. Family support**

Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement

 No Yes. Give specific information.....

Debtor 1 **Ashley T Wallace**
Debtor 2 **Sara J Wallace**

Case number (if known) _____

30. Other amounts someone owes you*Examples:* Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else

No
 Yes. Give specific information..

31. Interests in insurance policies*Examples:* Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance

No
 Yes. Name the insurance company of each policy and list its value.

Company name:

Beneficiary:

Surrender or refund value:

32. Any interest in property that is due you from someone who has died

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died.

No
 Yes. Give specific information..

33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment*Examples:* Accidents, employment disputes, insurance claims, or rights to sue

No
 Yes. Describe each claim.....

34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims

No
 Yes. Describe each claim.....

35. Any financial assets you did not already list

No
 Yes. Give specific information..

36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here.....

\$16,766.01

Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.**37. Do you own or have any legal or equitable interest in any business-related property?**

No. Go to Part 6.
 Yes. Go to line 38.

Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In.
If you own or have an interest in farmland, list it in Part 1.**46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?**

No. Go to Part 7.
 Yes. Go to line 47.

Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above**53. Do you have other property of any kind you did not already list?***Examples:* Season tickets, country club membership

No
 Yes. Give specific information.....

54. Add the dollar value of all of your entries from Part 7. Write that number here

\$0.00

Debtor 1 **Ashley T Wallace**
Debtor 2 **Sara J Wallace**

Case number (if known) _____

Part 8: List the Totals of Each Part of this Form

55. Part 1: Total real estate, line 2		\$490,000.00
56. Part 2: Total vehicles, line 5	\$35,587.50	
57. Part 3: Total personal and household items, line 15	\$10,800.00	
58. Part 4: Total financial assets, line 36	\$16,766.01	
59. Part 5: Total business-related property, line 45	\$0.00	
60. Part 6: Total farm- and fishing-related property, line 52	\$0.00	
61. Part 7: Total other property not listed, line 54	\$0.00	
62. Total personal property. Add lines 56 through 61...	\$63,153.51	Copy personal property total
63. Total of all property on Schedule A/B. Add line 55 + line 62		\$553,153.51

Fill in this information to identify your case:

Debtor 1	Ashley T Wallace		
	First Name	Middle Name	Last Name
Debtor 2	Sara J Wallace		
(Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <u>EASTERN DISTRICT OF NORTH CAROLINA</u>			
Case number (if known) _____			

Check if this is an amended filing

Official Form 106C**Schedule C: The Property You Claim as Exempt**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)

You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on *Schedule A/B* that you claim as exempt, fill in the information below.

Brief description of the property and line on <i>Schedule A/B</i> that lists this property	Current value of the portion you own Copy the value from <i>Schedule A/B</i>	Amount of the exemption you claim Check only one box for each exemption.	Specific laws that allow exemption
10299 Croft Point Ln Leland, NC 28451 Brunswick County Value: \$335,000.00 (Appraisal as of 4/2/2015, updated 9/2015) Purchased: 4/2003 Price: \$365,000.00 Tax value: 453,550.00 Ownership: T By E 1st Monthly Contractual payment: \$2,644.74 P/I/E D Line from <i>Schedule A/B</i> : 1.1	\$335,000.00	<input checked="" type="checkbox"/> \$60,000.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	N.C. Gen. Stat. § 1C-1601(a)(1)
998 Beech Mountain Pkwy Banner Elk, NC 28604 Avery County Value: 155,000.00 Purchased: 3/15/2012 Price: 103,000.00 Tax value: 209,000.00 Ownership: T By E Line from <i>Schedule A/B</i> : 1.2	\$155,000.00	<input checked="" type="checkbox"/> \$9,200.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	N.C. Gen. Stat. § 1C-1601(a)(2)

Debtor 1 **Ashley T Wallace**
Debtor 2 **Sara J Wallace**

Case number (if known)

Brief description of the property and line on <i>Schedule A/B</i> that lists this property	Current value of the portion you own Copy the value from <i>Schedule A/B</i>	Amount of the exemption you claim <i>Check only one box for each exemption.</i>	Specific laws that allow exemption
2005 GMC Yukon 228,000 miles Vin: 1GKFK16Z35J148858 Value: 11,800.00 Purchased: 8/2006 Price: \$28,000.00 Miles: 228,000/ Ownership: Wife Line from <i>Schedule A/B</i> : 3.2	\$11,800.00	<input checked="" type="checkbox"/> \$3,500.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	N.C. Gen. Stat. § 1C-1601(a)(3)
1986 Porsche 944 210,000 miles Vin: WP0AA0949GN452632 Value: 1000.00 Purchased: 2000 Price: Inherited Miles: 210,000/ Ownership: Husband Note: Car does not run; no tags not insured; poor condition Line from <i>Schedule A/B</i> : 3.4	\$1,000.00	<input checked="" type="checkbox"/> \$3,500.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	N.C. Gen. Stat. § 1C-1601(a)(3)
Household goods, furnishings & electronics Line from <i>Schedule A/B</i> : 6.1	\$2,500.00	<input checked="" type="checkbox"/> \$2,500.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	N.C. Gen. Stat. § 1C-1601(a)(4)
Any and all miscellaneous household goods and personal items listed herein. Line from <i>Schedule A/B</i> : 6.2	\$3,500.00	<input checked="" type="checkbox"/> \$3,500.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	N.C. Gen. Stat. § 1C-1601(a)(4)
Pistol & 2 rifles Line from <i>Schedule A/B</i> : 10.1	\$800.00	<input checked="" type="checkbox"/> \$800.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	N.C. Gen. Stat. § 1C-1601(a)(2)
Clothing & personal items Line from <i>Schedule A/B</i> : 11.1	\$500.00	<input checked="" type="checkbox"/> \$500.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	N.C. Gen. Stat. § 1C-1601(a)(4)
Rings Line from <i>Schedule A/B</i> : 12.1	\$3,500.00	<input checked="" type="checkbox"/> \$3,500.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	N.C. Gen. Stat. § 1C-1601(a)(4)
Riegelwood Federal Credit Union - checking Line from <i>Schedule A/B</i> : 17.1	\$560.55	<input checked="" type="checkbox"/> \$560.55 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	N.C. Gen. Stat. § 1-362
Checking: Woodforest Account no.: 1875339176 Walmart, 1114 NewPointe Blvd Leland, NC 28451 Line from <i>Schedule A/B</i> : 17.4	\$54.88	<input checked="" type="checkbox"/> \$54.88 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	N.C. Gen. Stat. § 1-362

Debtor 1 **Ashley T Wallace**
Debtor 2 **Sara J Wallace**

Case number (if known)

Brief description of the property and line on <i>Schedule A/B</i> that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption	
	Copy the value from <i>Schedule A/B</i>	<i>Check only one box for each exemption.</i>		
IRA: Morgan Stanley IRA Line from <i>Schedule A/B</i> : 21.1	\$6,165.81	<input checked="" type="checkbox"/> \$6,165.81 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	N.C. Gen. Stat. § 1C-1601(a)(9)	

3. Are you claiming a homestead exemption of more than \$155,675?

(Subject to adjustment on 4/01/16 and every 3 years after that for cases filed on or after the date of adjustment.)

No
 Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?
 No
 Yes

Rev. 12/2009

UNITED STATES BANKRUPTCY COURT
EASTERN DISTRICT OF NORTH CAROLINAIN THE MATTER OF:
Ashley T Wallace
Sara J Wallace
Debtor(s).

CASE NUMBER:

SCHEDULE C-1 - PROPERTY CLAIMED AS EXEMPT

We, **Ashley T Wallace and Sara J Wallace**, claim the following property as exempt pursuant to 11 U.S.C. § 522 and the laws of the State of North Carolina, and nonbankruptcy Federal law: **(Attach additional sheets if necessary)**.

1. NCGS 1C-1601(a)(1) (NC Const., Article X, Section 2) REAL OR PERSONAL PROPERTY USED AS A RESIDENCE OR BURIAL PLOT (The exemption is not to exceed \$35,000; however, an unmarried debtor who is 65 years of age or older is entitled to retain an aggregate interest in the property not to exceed \$60,000 in value so long as the property was previously owned by the debtor as a tenant by the entireties or as a joint tenant with rights of survivorship and the former co-owner of the property is deceased, in which case the debtor must specify his/her age and the name of the former co-owner, if a child use initials only, of the property below).

Description of Property and Address	Market Value	Owner (H)Husband (W)Wife (J)Joint	Mortgage Holder or Lien Holder	Amount of Mortgage or Lien	Net Value	Value Claimed as Exempt Pursuant to NCGS 1C-1601(a)(1)
10299 Croft Point Ln Leland, NC 28451 Brunswick County Value: \$335,000.00 (Appraisal as of 4/2/2015, updated 9/2015) Purchased: 4/2003 Price: \$365,000.00 Tax value: 453,550.00 Ownership: T By E 1st Monthly Contractual payment: \$2,644.74 P/I/E D	335,000.00	J	Wells Fargo Hm Mortgag Bank of Ozarks	365,253.40 239,726.00	0.00	60,000.00

Debtor's Age: _____
Name of former co-owner: _____

VALUE OF REAL ESTATE CLAIMED AS EXEMPT PURSUANT TO NCGS 1C-1601(a)(1): \$ 60,000.00

2. NCGS 1C-1601(a)(3) MOTOR VEHICLE (The exemption in one vehicle is not to exceed \$3,500).

Model, Year Style of Auto	Market Value	Owner (H)Husband (W)Wife (J)Joint	Lien Holder	Amount of Lien	Net Value	Value Claimed as Exempt Pursuant to NCGS 1C-1601(a)(3)
1986 Porsche 944 210,000 miles Vin: WP0AA0949GN452 632 Value: 1000.00 Purchased: 2000 Price: Inherited Miles: 210,000/ Ownership: Husband Note: Car does not run; no tags not insured; poor condition	1,000.00	H			1,000.00	3,500.00

Schedule C-1 - Property Claimed as Exempt - 12/2009

Model, Year Style of Auto	Market Value	Owner (H)Husband (W)Wife (J)Joint	Lien Holder	Amount of Lien	Net Value	Value Claimed as Exempt Pursuant to NCGS 1C-1601(a)(3)
2005 GMC Yukon 228,000 miles Vin: 1GKFK16Z35J1488 58 Value: 11,800.00 Purchased: 8/2006 Price: \$28,000.00 Miles: 228,000/ Ownership: Wife	11,800.00	W			11,800.00	3,500.00

VALUE OF MOTOR VEHICLE CLAIMED AS EXEMPT PURSUANT TO NCGS 1C-1601(a)(3): \$ 7,000.00

3. NCGS 1C-1601(a)(4) (NC Const., Article X, Section 1) PERSONAL OR HOUSEHOLD GOODS (The debtor's aggregate interest is not to exceed \$5,000 plus \$1,000 for each dependent of the debtor, not to exceed \$4,000 total for dependents). The number of dependents for exemption purposes is 2.

Description of Property	Market Value	Owner (H)Husband (W)Wife (J)Joint	Lien Holder	Amount of Lien	Net Value	Claimed as Exempt Pursuant to NCGS 1C-1601(a)(4)
Any and all miscellaneous household goods and personal items listed herein.	3,500.00	J			3,500.00	3,500.00
Clothing & personal items	500.00	J			500.00	500.00
Household goods, furnishings & electronics	2,500.00	J			2,500.00	2,500.00
Rings	3,500.00	W			3,500.00	3,500.00

VALUE CLAIMED AS EXEMPT PURSUANT TO NCGS 1C-1601(a)(4): \$ 10,000.00

4. NCGS 1C-1601(a)(5) TOOLS OF TRADE (The debtor's aggregate interest is not to exceed \$2,000 in value).

Description	Market Value	Owner (H)Husband (W)Wife (J)Joint	Lien Holder	Amount of Lien	Net Value	Value Claimed as Exempt Pursuant to NCGS 1C-1601(a)(5)
-NONE-						

VALUE CLAIMED AS EXEMPT PURSUANT TO NCGS 1C-1601(a)(5): \$ 0.00

5. NCGS 1C-1601(a)(6) LIFE INSURANCE (NC Const., Article X, Section 5).

Description\Insured\Last Four Digits of Policy Number\Beneficiary(if child, initials only)			Cash Value
-NONE-			

6. NCGS 1C-1601(a)(7) PROFESSIONALLY PRESCRIBED HEALTH AIDS (For Debtor or Debtor's Dependents, no limit on value).

Description
-NONE-

7. NCGS 1C-1601(a)(8) COMPENSATION FOR PERSONAL INJURY, INCLUDING COMPENSATION FROM PRIVATE DISABILITY POLICIES OR ANNUITIES, OR COMPENSATION FOR DEATH OF A PERSON UPON WHOM THE DEBTOR WAS DEPENDENT FOR SUPPORT. COMPENSATION NOT EXEMPT FROM RELATED LEGAL, HEALTH OR FUNERAL EXPENSE.

Description AND Source of Compensation, Including Name (If child, initials only) & Last Four Digits of Account Number of any Disability Policy/Annuity
--

Description AND Source of Compensation, Including Name (If child, initials only) & Last Four Digits of Account Number of any Disability Policy/Annuity						
-NONE-						

8. NCGS 1C-1601(a)(2) ANY PROPERTY (Debtor's aggregate interest in any property is not to exceed \$5,000 in value of any unused exemption amount to which the debtor is entitled under NCGS 1C-1601(a)(1)).

Description of Property and Address	Market Value	Owner (H)Husband (W)Wife (J)Joint	Lien Holder	Amount of Lien	Net Value	Value Claimed as Exempt Pursuant to NCGS 1C-1601(a)(2)
998 Beech Mountain Pkwy Banner Elk, NC 28604 Avery County Value: 155,000.00 Purchased: 3/15/2012 Price: 103,000.00 Tax value: 209,000.00 Ownership: T By E	155,000.00	J			155,000.00	9,200.00
Pistol & 2 rifles	800.00	H			800.00	800.00

VALUE CLAIMED AS EXEMPT PURSUANT TO NCGS 1C-1601(a)(2): \$ 10,000.00

9. NCGS 1C-1601(a)(9) and 11 U.S.C. § 522 INDIVIDUAL RETIREMENT PLANS & RETIREMENT FUNDS, as defined in the Internal Revenue Code, and any plan treated in the same manner as an individual retirement plan, including individual retirement accounts and Roth retirement accounts as described in §§ 408(a) and 408A of the Internal Revenue Code, individual retirement annuities as described in § 408(b) of the Internal Revenue Code, accounts established as part of a trust described in § 408(c) of the Internal Revenue Code, and funds in an account exempt from taxation under § 401, 403, 408, 408A, 414, 457, or 510(a) of the Internal Revenue Code. For purposes of this subdivision, "Internal Revenue Code" means Code as defined in G.S. 105-228.90.

Type of Account\Location of Account\Last Four Digits of Account Number
IRA: Morgan Stanley IRA

10. NCGS 1C-1601(a)(10) FUNDS IN A COLLEGE SAVINGS PLAN, as qualified under § 529 of the Internal Revenue Code, and that are not otherwise excluded from the estate pursuant to 11 U.S.C. §§ 541(b)(5)-(6), (e), not to exceed a cumulative limit of \$25,000. If funds were placed in a college savings plan within the 12 months prior to filing, the contributions must have been made in the ordinary course of the debtor's financial affairs and must have been consistent with the debtor's past pattern of contributions. The exemption applies to funds for a child of the debtor that will actually be used for the child's college or university expenses.

College Savings Plan\Last Four Digits of Account Number\Value\Initials of Child Beneficiary
-NONE-

11. NCGS 1C-1601(a)(11) RETIREMENT BENEFITS UNDER THE RETIREMENT PLANS OF OTHER STATES AND GOVERNMENTAL UNITS OF OTHER STATES (The debtor's interest is exempt only to the extent that these benefits are exempt under the laws of the state or governmental unit under which the benefit plan is established).

Name of Retirement Plan\State Governmental Unit\Last Four Digits of Identifying Number
-NONE-

12. NCGS 1C-1601(a)(12) ALIMONY, SUPPORT, SEPARATE MAINTENANCE, AND CHILD SUPPORT PAYMENTS OR FUNDS THAT HAVE BEEN RECEIVED OR TO WHICH THE DEBTOR IS ENTITLED (The debtor's interest is exempt to the extent the payments or funds are reasonably necessary for the support of the debtor or any dependent of the debtor).

Type of Support\Amount\Location of Funds
-NONE-

13. TENANCY BY THE ENTIRETY. The following property is claimed as exempt pursuant to 11 U.S.C. § 522 and the law of the State of North Carolina pertaining to property held as tenants by the entirety.

Description of Property and Address	Market Value	Lien Holder	Amount of Lien	Net Value
-NONE-				

VALUE CLAIMED AS EXEMPT: \$ 0.00

14. NORTH CAROLINA PENSION FUND EXEMPTIONS

	-NONE-	
--	---------------	--

15. OTHER EXEMPTIONS CLAIMED UNDER LAWS OF THE STATE OF NORTH CAROLINA

a.	Debtor earnings necessary to support family (all earnings from last 60 days), N.C. Gen. Stat. § 1-362	54.88
b.	Debtor earnings necessary to support family (all earnings from last 60 days), N.C. Gen. Stat. § 1-362	560.55

16. FEDERAL PENSION FUND EXEMPTIONS

	-NONE-	
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17. OTHER EXEMPTIONS CLAIMED UNDER NONBANKRUPTCY FEDERAL LAW

	-NONE-	
--	---------------	--

18. RECENT PURCHASES

(a). List tangible personal property purchased by the debtor within ninety (90) days of the filing of the bankruptcy petition.

Description	Market Value	Lien Holder	Amount of Lien	Net Value
-NONE-				

(b). List any tangible personal property from 18(a) that is directly traceable to the liquidation or conversion of property that may be exempt and that was not acquired by transferring or using additional property.

Description of Replacement Property	Description of Property Liquidated or Converted that May Be Exempt

19. The debtor's property is subject to the following claims:

- a. Of the United States or its agencies as provided by federal law.
- b. Of the State of North Carolina or its subdivisions for taxes, appearance bonds or fiduciary bonds;
- c. Of a lien by a laborer for work done and performed for the person claiming the exemption, but only as to the specific property affected.
- d. Of a lien by a mechanic for work done on the premises, but only as to the specific property affected.
- e. For payment of obligations contracted for the purchase of specific real property affected.
- f. For contractual security interests in specific property affected; provided, that the exemptions shall apply to the debtor's household goods notwithstanding any contract for a nonpossessory, nonpurchase money security interest in any such goods.
- g. For statutory liens, on the specific property affected, other than judicial liens.
- h. For child support, alimony or distributive award order pursuant to Chapter 50 of the General Statutes of North Carolina.
- i. For criminal restitution orders docketed as civil judgments pursuant to G.S. 15A-1340.38.
- j. Debts of a kind specified in 11 U.S.C. § 523(a)(1) (certain taxes), (5) (domestic support obligations).
- k. Debts of a kind specified in 11 U.S.C. § 522(c).

Claimant	Nature of Claim	Amount of Claim	Description of Property	Value of Property	Net Value
Volkswagen Credit Inc	PMSI	15,742.00	2013 Volkswagen Jetta 51,000 miles Vin: 3VWDP7AJ5DM387254 Value: 13,275.00 Purchased: 2013 Miles: 51,000/ Ownership: Wife with Judith Jones	13,275.00	0.00 50% owned

None of the property listed in paragraph 18(a), except qualified replacement property under 18(b), has been included in this claim of exemptions.

None of the claims listed in paragraph 19 is subject to this claim of exemptions.

I declare that to the extent any exemptions I have claimed appear on its face to exceed the amount allowed by the applicable statute, I claim only the maximum amount allowed by statute.

UNSWORN DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF INDIVIDUAL
TO SCHEDULE C-1 - PROPERTY CLAIMED AS EXEMPT

We, Ashley T Wallace and Sara J Wallace, declare under penalty of perjury that I have read the foregoing Schedule C-1 - Property Claimed as Exempt, consisting of 6 sheets, and that they are true and correct to the best of my knowledge, information and belief.

Executed on: February 17, 2016

/s/ Ashley T Wallace

Ashley T Wallace

Debtor

/s/ Sara J Wallace

Sara J Wallace

Joint Debtor

Fill in this information to identify your case:

Debtor 1	Ashley T Wallace		
	First Name	Middle Name	Last Name
Debtor 2	Sara J Wallace		
(Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <u>EASTERN DISTRICT OF NORTH CAROLINA</u>			
Case number (if known) _____			

Check if this is an amended filing

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

1. Do any creditors have claims secured by your property?

No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.

Yes. Fill in all of the information below.

Part 1: List All Secured Claims

2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name.

2.1	Bank of Ozarks	Describe the property that secures the claim:	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
-----	----------------	---	--	--	--

Creditor's Name

10299 Croft Point Ln Leland, NC
28451 Brunswick County
Value: \$335,000.00 (Appraisal as of
4/2/2015, updated 9/2015)
Purchased: 4/2003
Price: \$365,000.00
Tax value: 453,550.00
Ownership: T By E
1st Monthly Contractual payment: \$

\$239,726.00

\$335,000.00

\$239,726.00

Attn: Officer/Managing
Agent
P O Box 196
Ozark, AR 72949

Number, Street, City, State & Zip Code

Who owes the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim relates to a community debt

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

Nature of lien. Check all that apply.

An agreement you made (such as mortgage or secured car loan)
 Statutory lien (such as tax lien, mechanic's lien)
 Judgment lien from a lawsuit
 Other (including a right to offset) **2nd Mortgage**

Date debt was incurred

Last 4 digits of account number

2977

2.2 Volkswagen Credit Inc

Creditor's Name

Describe the property that secures the claim:

\$15,742.00

\$13,275.00

\$2,467.00

National Bankruptcy
Services
9441 Lbj Freeway, Suite
250
Dallas, TX 75241

Number, Street, City, State & Zip Code

2013 Volkswagen Jetta 51,000 miles
Vin: 3VWDP7AJ5DM387254
Value: 13,275.00
Purchased: 2013
Miles: 51,000/
Ownership: Wife with Judith Jones

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

Nature of lien. Check all that apply.

Debtor 1 Ashley T Wallace First Name _____ Middle Name _____ Last Name _____	Case number (if known) _____					
Debtor 2 Sara J Wallace First Name _____ Middle Name _____ Last Name _____						
<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> Judgment lien from a lawsuit <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt <input type="checkbox"/> Other (including a right to offset) PMSI						
Date debt was incurred _____	Last 4 digits of account number 7677					
<table border="1"> <tr> <td>2.3 Wells Fargo Hm Mortgag Creditor's Name</td> <td>Describe the property that secures the claim: 10299 Croft Point Ln Leland, NC 28451 Brunswick County Value: \$335,000.00 (Appraisal as of 4/2/2015, updated 9/2015) Purchased: 4/2003 Price: \$365,000.00 Tax value: 453,550.00 Ownership: T By E 1st Monthly Contractual payment: \$ As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed </td> <td>\$365,253.40</td> <td>\$335,000.00</td> <td>\$30,253.40</td> </tr> </table>		2.3 Wells Fargo Hm Mortgag Creditor's Name	Describe the property that secures the claim: 10299 Croft Point Ln Leland, NC 28451 Brunswick County Value: \$335,000.00 (Appraisal as of 4/2/2015, updated 9/2015) Purchased: 4/2003 Price: \$365,000.00 Tax value: 453,550.00 Ownership: T By E 1st Monthly Contractual payment: \$ As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$365,253.40	\$335,000.00	\$30,253.40
2.3 Wells Fargo Hm Mortgag Creditor's Name	Describe the property that secures the claim: 10299 Croft Point Ln Leland, NC 28451 Brunswick County Value: \$335,000.00 (Appraisal as of 4/2/2015, updated 9/2015) Purchased: 4/2003 Price: \$365,000.00 Tax value: 453,550.00 Ownership: T By E 1st Monthly Contractual payment: \$ As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$365,253.40	\$335,000.00	\$30,253.40		
Attn: Officer 8480 Stagecoach Cir Frederick, MD 21701 Number, Street, City, State & Zip Code						
Who owes the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt 1st Mortgage						
Date debt was incurred _____	Last 4 digits of account number 8104					
Add the dollar value of your entries in Column A on this page. Write that number here: If this is the last page of your form, add the dollar value totals from all pages. Write that number here:		<table border="1"> <tr> <td>\$620,721.40</td> </tr> <tr> <td>\$620,721.40</td> </tr> </table>			\$620,721.40	\$620,721.40
\$620,721.40						
\$620,721.40						
Part 2: List Others to Be Notified for a Debt That You Already Listed Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.						
<input type="checkbox"/> Name, Number, Street, City, State & Zip Code Wells Fargo Attn: Officer P O Box 10335 Des Moines, IA 50306		On which line in Part 1 did you enter the creditor? 2.3 Last 4 digits of account number _____				

2/19/16 12:59PM

Fill in this information to identify your case:

Debtor 1	Ashley T Wallace		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse if, filing)	Sara J Wallace		
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <u>EASTERN DISTRICT OF NORTH CAROLINA</u>			
Case number (if known)	<hr/>		

Check if this is an amended filing

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known).

Part 1: List All of Your PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims against you?

No. Go to Part 2.

Yes.

2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.

(For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)

(For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)		Total claim	Priority amount	Nonpriority amount	
2.1	Brunswick Co. Tax Collec Priority Creditor's Name Attn: Managing Agent P O Box 29 Bolivia, NC 28422	Last 4 digits of account number	\$2,464.41	\$2,464.41	\$0.00
	Number Street City State Zip Code	When was the debt incurred?			
	Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply			
	<input type="checkbox"/> Debtor 1 only	<input type="checkbox"/> Contingent			
	<input type="checkbox"/> Debtor 2 only	<input type="checkbox"/> Unliquidated			
	<input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only	<input type="checkbox"/> Disputed			
	<input type="checkbox"/> At least one of the debtors and another	Type of PRIORITY unsecured claim:			
	<input type="checkbox"/> Check if this claim is for a community debt	<input type="checkbox"/> Domestic support obligations			
	Is the claim subject to offset?	<input checked="" type="checkbox"/> Taxes and certain other debts you owe the government			
	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Claims for death or personal injury while you were intoxicated			
	<input type="checkbox"/> Yes	<input type="checkbox"/> Other. Specify _____			

Debtor 1 **Ashley T Wallace**
Debtor 2 **Sara J Wallace**

Case number (if known)

2.2	IRS Priority Creditor's Name Attn: Managing Agent PO Box 7346 Philadelphia, PA 19101-7346 Number Street City State Zip Code	Last 4 digits of account number	\$10,012.00	\$10,012.00	\$0.00
		When was the debt incurred?			
		As of the date you file, the claim is: Check all that apply			
		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed			
		Type of PRIORITY unsecured claim:			
		<input type="checkbox"/> Domestic support obligations <input checked="" type="checkbox"/> Taxes and certain other debts you owe the government <input type="checkbox"/> Claims for death or personal injury while you were intoxicated <input type="checkbox"/> Other. Specify _____			
		2014 Taxes			
2.3	Nc Dept of Revenue Priority Creditor's Name Attn: Managing Agent P O Box 1168 Raleigh, NC 27602 Number Street City State Zip Code	Last 4 digits of account number	\$8,819.14	\$8,819.14	\$0.00
		When was the debt incurred?			
		As of the date you file, the claim is: Check all that apply			
		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed			
		Type of PRIORITY unsecured claim:			
		<input type="checkbox"/> Domestic support obligations <input checked="" type="checkbox"/> Taxes and certain other debts you owe the government <input type="checkbox"/> Claims for death or personal injury while you were intoxicated <input type="checkbox"/> Other. Specify _____			
		2014 income taxes			
2.4	Town of Beech Mountain tax Priority Creditor's Name Attn: Managing Agent 403 Beech Mountain Pkwy Beech Mountain, NC 28604-8012 Number Street City State Zip Code	Last 4 digits of account number	\$1,529.88	\$1,529.88	\$0.00
		When was the debt incurred?			
		As of the date you file, the claim is: Check all that apply			
		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed			
		Type of PRIORITY unsecured claim:			
		<input type="checkbox"/> Domestic support obligations <input checked="" type="checkbox"/> Taxes and certain other debts you owe the government <input type="checkbox"/> Claims for death or personal injury while you were intoxicated <input type="checkbox"/> Other. Specify _____			

Debtor 1 **Ashley T Wallace**
 Debtor 2 **Sara J Wallace**

Case number (if known) _____

2.5	Watauga County Tax Collector	Last 4 digits of account number	\$740.09	\$740.09	\$0.00
Priority Creditor's Name Attn: Managing Agent 842 W King St Boone, NC 28607		When was the debt incurred? _____			
Number Street City State Zip Code					
Who incurred the debt? Check one.					
<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another					
<input type="checkbox"/> Check if this claim is for a community debt					
Is the claim subject to offset?					
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes					
As of the date you file, the claim is: Check all that apply					
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed					
Type of PRIORITY unsecured claim:					
<input type="checkbox"/> Domestic support obligations <input checked="" type="checkbox"/> Taxes and certain other debts you owe the government <input type="checkbox"/> Claims for death or personal injury while you were intoxicated <input type="checkbox"/> Other. Specify _____					

Part 2: List All of Your NONPRIORITY Unsecured Claims**3. Do any creditors have nonpriority unsecured claims against you?**

No. You have nothing to report in this part. Submit this form to the court with your other schedules.

Yes.

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

		Total claim
4.1	Afni, Inc.	\$767.00
Nonpriority Creditor's Name Attn: Managing Agent P O Box 3097 Bloomington, IL 61702		Last 4 digits of account number 1367
Number Street City State Zip Code		When was the debt incurred? Opened 1/01/15
Who incurred the debt? Check one.		
<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another		
<input type="checkbox"/> Check if this claim is for a community debt		
Is the claim subject to offset?		
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
As of the date you file, the claim is: Check all that apply		
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Type of NONPRIORITY unsecured claim:		
<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Collection Attorney Dish Network		

Debtor 1 **Ashley T Wallace**
 Debtor 2 **Sara J Wallace**

Case number (if known) _____

4.2	Bank of America Nonpriority Creditor's Name Attn: Officer P O Box 982235 El Paso, TX 79998 Number Street City State Zip Code	Last 4 digits of account number 0387	\$5,528.00
		When was the debt incurred? Opened 8/01/96 Last Active 3/05/13	
	As of the date you file, the claim is: Check all that apply		
	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Type of NONPRIORITY unsecured claim:		
	<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts		
	<input checked="" type="checkbox"/> Other. Specify Credit Card		
4.3	BB&T Nonpriority Creditor's Name Attn: Jack Hayes P.O. Box 1847 Wilson, NC 27894-1847 Number Street City State Zip Code	Last 4 digits of account number xxxx	\$14,797.00
		When was the debt incurred? 11/26/2002	
	As of the date you file, the claim is: Check all that apply		
	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Type of NONPRIORITY unsecured claim:		
	<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts		
	<input checked="" type="checkbox"/> Other. Specify _____		
4.4	Cameron Management, Inc. Nonpriority Creditor's Name Attn: Managing Agent 1201 Glen Meade Rd Wilmington, NC 28401 Number Street City State Zip Code	Last 4 digits of account number	Unknown
		When was the debt incurred? 8/1/2011	
	As of the date you file, the claim is: Check all that apply		
	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed		
	Type of NONPRIORITY unsecured claim:		
	<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts		
	<input checked="" type="checkbox"/> Other. Specify Personal guaranty for Wallace Educational Holdings, LLC		

Debtor 1 **Ashley T Wallace**
Debtor 2 **Sara J Wallace**

Case number (if known) _____

4.5	Certegy Nonpriority Creditor's Name Attn: Managing Agent P O Box 30046 Tampa, FL 33630	Last 4 digits of account number 2642	\$43.00
		When was the debt incurred? 1/1/2014	
<p>As of the date you file, the claim is: Check all that apply</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify Go Daddy Account</p>			
<p>Who incurred the debt? Check one.</p> <p><input type="checkbox"/> Debtor 1 only <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>			
<hr/> <p>4.6 Citibank/The Home Depot Nonpriority Creditor's Name Attn: Managing Agent Po Box 790040 Saint Louis, MO 63179</p> <p>Number Street City State Zip Code</p> <p>Who incurred the debt? Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>			
<p>Last 4 digits of account number 8005</p> <p>When was the debt incurred? Opened 3/01/11 Last Active 2/01/13</p> <p>As of the date you file, the claim is: Check all that apply</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify Charge Account</p>			
<hr/> <p>4.7 CitiCards CBNA Nonpriority Creditor's Name Attn: Managing Agent P O Box 6241 Sioux Falls, SD 57117</p> <p>Number Street City State Zip Code</p> <p>Who incurred the debt? Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>			
<p>Last 4 digits of account number _____</p> <p>When was the debt incurred? 11/1/2011</p> <p>As of the date you file, the claim is: Check all that apply</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify _____</p>			

Debtor 1 **Ashley T Wallace**
 Debtor 2 **Sara J Wallace**

Case number (if known) _____

4.8

College Foundation Inc Nonpriority Creditor's Name Attn: Managing Agent 2917 Highwoods Blvd Raleigh, NC 27604	Number Street City State Zip Code	Last 4 digits of account number 0479	\$2,402.00
When was the debt incurred? Opened 8/01/98 Last Active 12/18/12			
As of the date you file, the claim is: Check all that apply			
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed			
Type of NONPRIORITY unsecured claim:			
<input checked="" type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify _____			
Educational			

4.9

College Foundation Inc Nonpriority Creditor's Name Attn: Managing Agent 2917 Highwoods Blvd Raleigh, NC 27604	Number Street City State Zip Code	Last 4 digits of account number 0579	\$1,228.00
When was the debt incurred? Opened 8/01/98 Last Active 12/18/12			
As of the date you file, the claim is: Check all that apply			
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed			
Type of NONPRIORITY unsecured claim:			
<input checked="" type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify _____			
Educational			

4.10

Duke University Nonpriority Creditor's Name Attn: Managing Agent 2106 Campus Dr Durham, NC 27708	Number Street City State Zip Code	Last 4 digits of account number R24A	\$1,535.00
When was the debt incurred? Opened 8/01/98 Last Active 1/31/13			
As of the date you file, the claim is: Check all that apply			
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed			
Type of NONPRIORITY unsecured claim:			
<input checked="" type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify _____			
Educational			

Debtor 1 **Ashley T Wallace**
 Debtor 2 **Sara J Wallace**

Case number (if known) _____

4.11	Fed Loan Serv Nonpriority Creditor's Name Attn: Managing Agent P O Box 60610 Harrisburg, PA 17106 Number Street City State Zip Code	Last 4 digits of account number 0005	\$20,500.00
		When was the debt incurred? Opened 8/01/14 Last Active 7/31/15	
	As of the date you file, the claim is: Check all that apply		
	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Type of NONPRIORITY unsecured claim:		
	<input checked="" type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify _____		
	Educational		
4.12	Fed Loan Serv Nonpriority Creditor's Name Attn: Managing Agent P O Box 60610 Harrisburg, PA 17106 Number Street City State Zip Code	Last 4 digits of account number 0001	\$10,500.00
		When was the debt incurred? Opened 1/01/14 Last Active 7/31/15	
	As of the date you file, the claim is: Check all that apply		
	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Type of NONPRIORITY unsecured claim:		
	<input checked="" type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify _____		
	Educational		
4.13	Fed Loan Serv Nonpriority Creditor's Name Attn: Managing Agent P O Box 60610 Harrisburg, PA 17106 Number Street City State Zip Code	Last 4 digits of account number 0002	\$8,047.00
		When was the debt incurred? Opened 6/01/14 Last Active 7/31/15	
	As of the date you file, the claim is: Check all that apply		
	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Type of NONPRIORITY unsecured claim:		
	<input checked="" type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify _____		
	Educational		

Debtor 1 **Ashley T Wallace**
Debtor 2 **Sara J Wallace**

Case number (if known)

4.14	Fed Loan Serv Nonpriority Creditor's Name Attn: Managing Agent P O Box 606010 Harrisburg, PA 17106 Number Street City State Zip Code	Last 4 digits of account number 0003 When was the debt incurred? Opened 10/01/02 Last Active 7/31/15	\$1,647.00
As of the date you file, the claim is: Check all that apply			
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed			
Type of NONPRIORITY unsecured claim:			
<input checked="" type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify _____			
Educational			
4.15	Fed Loan Serv Nonpriority Creditor's Name Attn: Managing Agent P O Box 60610 Harrisburg, PA 17106 Number Street City State Zip Code	Last 4 digits of account number 0004 When was the debt incurred? Opened 11/01/03 Last Active 7/31/15	\$1,317.00
As of the date you file, the claim is: Check all that apply			
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed			
Type of NONPRIORITY unsecured claim:			
<input checked="" type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify _____			
Educational			
4.16	Goodyear/cbna Nonpriority Creditor's Name Attn: Managing Agent P O Box 6497 Sioux Falls, SD 57117 Number Street City State Zip Code	Last 4 digits of account number 9584 When was the debt incurred? Opened 8/01/12 Last Active 1/31/13	\$1,753.00
As of the date you file, the claim is: Check all that apply			
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed			
Type of NONPRIORITY unsecured claim:			
<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Charge Account			

Debtor 1 **Ashley T Wallace**
Debtor 2 **Sara J Wallace**

Case number (if known) _____

4.17	Huntington Learning Center Nonpriority Creditor's Name Attn: Managing Agent 496 Kindekamack Rd Oradell, NJ 07649 Number Street City State Zip Code	Last 4 digits of account number _____ When was the debt incurred? <u>8/1/2006</u>	Unknown
As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed			
Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts			
Personal guaranty for Wallace Educations Holdings, LLC			
Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another			
Check if this claim is for a community debt Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes			
Larry Coats Nonpriority Creditor's Name Coats & Bennet, PLLC 1400 Crescent Green, Ste 300 Cary, NC 27518 Number Street City State Zip Code			
Last 4 digits of account number <u>\$2,115.00</u> When was the debt incurred?			
As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed			
Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts			
Date of last use June, 2012			
Midland Funding Nonpriority Creditor's Name Attn: Managing Agent 2365 Northside Drive San Diego, CA 92108 Number Street City State Zip Code			
Last 4 digits of account number <u>2236</u> When was the debt incurred? <u>Opened 10/01/14</u>			
As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed			
Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts			
Factoring Company Account Ge Capital Retail Bank			

Debtor 1 **Ashley T Wallace**
Debtor 2 **Sara J Wallace**

Case number (if known) _____

4.20	Navient Nonpriority Creditor's Name Attn: Managing Agent P O Box 9500 Wilkes Barre, PA 18773 Number Street City State Zip Code	Last 4 digits of account number 0319 When was the debt incurred? Opened 3/01/04 Last Active 5/30/13	\$8,753.00
As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input checked="" type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify _____			
Educational			
4.21	New Centre Drive, LLC Nonpriority Creditor's Name Attn: Managing Agent 1201 Glen Meade Rd Wilmington, NC 28401 Number Street City State Zip Code	Last 4 digits of account number _____ When was the debt incurred? _____	\$0.00
As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify _____			
4.22	Paragon Revenue Group Nonpriority Creditor's Name Attn: Managing Agent P O Box 126 Concord, NC 28026 Number Street City State Zip Code	Last 4 digits of account number 0717 When was the debt incurred? Opened 7/01/12 Last Active 8/24/12	\$1,709.00
As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Collection Attorney New Hanover Regional Med Cente			

Debtor 1 **Ashley T Wallace**
 Debtor 2 **Sara J Wallace**

Case number (if known) _____

4.23	Portfolio Recovery Asst Nonpriority Creditor's Name Attn: Managing Agent 287 Independence Virginia Beach, VA 23462 Number Street City State Zip Code	Last 4 digits of account number 7885	\$5,383.00
	Who incurred the debt? Check one.	When was the debt incurred? Opened 9/01/13	
	<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another	As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts	
	<input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Factoring Company Account Ge Capital <input checked="" type="checkbox"/> Other. Specify Retail Bank	
4.24	Sams Club / GEMB Nonpriority Creditor's Name Attn: Managing Agent Po Box 103104 Roswell, GA 30076 Number Street City State Zip Code	Last 4 digits of account number 2567	\$4,052.00
	Who incurred the debt? Check one.	When was the debt incurred? Opened 11/01/08 Last Active 12/17/12	
	<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another	As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts	
	<input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<input checked="" type="checkbox"/> Other. Specify Charge Account	
4.25	Suntrust Bank Nonpriority Creditor's Name Attn: Officer 7455 Chancellor Dr Orlando, FL 32809 Number Street City State Zip Code	Last 4 digits of account number 0805	\$6,265.00
	Who incurred the debt? Check one.	When was the debt incurred?	
	<input type="checkbox"/> Debtor 1 only <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another	As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts	
	<input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<input checked="" type="checkbox"/> Other. Specify _____	

Debtor 1 **Ashley T Wallace**
 Debtor 2 **Sara J Wallace**

Case number (if known) _____

4.26	<p>Timepayment Corp Llc Nonpriority Creditor's Name Attn: Managing Agent 16 New England Exe Office Park S Burlington, MA 01803 Number Street City State Zip Code</p> <p>Who incurred the debt? Check one.</p> <p><input type="checkbox"/> Debtor 1 only <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number 3639 \$6,141.00</p> <p>When was the debt incurred? Opened 8/01/11 Last Active 4/02/14</p> <p>As of the date you file, the claim is: Check all that apply</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify Rental Agreement</p>
4.27	<p>Usaa Savings Bank Nonpriority Creditor's Name Attn: Officer P O Box 47504 San Antonio, TX 78265 Number Street City State Zip Code</p> <p>Who incurred the debt? Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number 3667 \$8,834.00</p> <p>When was the debt incurred? Opened 5/01/09 Last Active 3/15/13</p> <p>As of the date you file, the claim is: Check all that apply</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify Credit Card</p>
4.28	<p>Verizon Nonpriority Creditor's Name Attn: Managing Agent 500 Technology Dr Ste 550 Weldon Spring, MO 63304 Number Street City State Zip Code</p> <p>Who incurred the debt? Check one.</p> <p><input type="checkbox"/> Debtor 1 only <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number 0001 \$756.00</p> <p>When was the debt incurred? Opened 8/01/08 Last Active 9/30/14</p> <p>As of the date you file, the claim is: Check all that apply</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify _____</p>

Debtor 1 **Ashley T Wallace**
Debtor 2 **Sara J Wallace**

Case number (if known)

4.29	Wells Fargo Nonpriority Creditor's Name Attn: Officer P O Box 60510 Los Angeles, CA 90060 Number Street City State Zip Code	Last 4 digits of account number 5079	\$10,393.00
		When was the debt incurred? Opened 8/01/96 Last Active 6/07/13	
	As of the date you file, the claim is: Check all that apply		
	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Check Credit Or Line Of Credit		
	Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

4.30	Wells Fargo Bank Nonpriority Creditor's Name Attn: Officer P O Box 14517 Des Moines, IA 50306 Number Street City State Zip Code	Last 4 digits of account number 1898	\$21,604.00
		When was the debt incurred? Opened 11/01/06 Last Active 2/18/13	
	As of the date you file, the claim is: Check all that apply		
	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Credit Card		
	Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Name and Address

Andrew Bielfuss
Quarles & Brady LLP
411 E Wisconsin Ave Ste 2040
Milwaukee, WI 53202-4497

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.17 of (Check one):

Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Name and Address

Dept of Ed/PHEAA
Attn: Managing Agent
P O Box 530210
Atlanta, GA 30353-0210

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.11 of (Check one):

Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Name and Address

GE Capital Bank
Attn: Managing Agent
120 Corporate Blvd Ste 1
Norfolk, VA 23502

Last 4 digits of account number

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.23 of (Check one):

Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Name and Address

On which entry in Part 1 or Part 2 did you list the original creditor?

Debtor 1 **Ashley T Wallace**
 Debtor 2 **Sara J Wallace**

Case number (if known) _____

Jim Emmerson
Chief Financial Officer
496 Kindermack Rd
Oradell, NJ 07649

Line **4.17** of (Check one):

Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address
Mark Carter
Morgan & Carter, PLLC
602 Market St
Wilmington, NC 28401

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.21** of (Check one):

Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address
Midland Funding
Attn: Managing Agent
8875 Aero Dr Ste 200
San Diego, CA 92123

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.19** of (Check one):

Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address
New Hanover Regional Med Center
Attention: Managing Agent
PO Box 70826
Charlotte, NC 28272

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.22** of (Check one):

Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address
Time Payment Corp
Attn: Managing Agent
P o Box 3069
Woburn, MA 01888-1969

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.26** of (Check one):

Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address
Verizon Wireless
Attn: Managing Agent
1 Verizon Place
Alpharetta, GA 30004

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.28** of (Check one):

Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

		Total Claim
Total claims from Part 1	6a. Domestic support obligations	6a. \$ 0.00
	6b. Taxes and certain other debts you owe the government	6b. \$ 23,565.52
	6c. Claims for death or personal injury while you were intoxicated	6c. \$ 0.00
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d. \$ 0.00
6e. Total Priority. Add lines 6a through 6d.		23,565.52
Total claims from Part 2	6f. Student loans	6f. \$ 55,929.00
	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g. \$ 0.00
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h. \$ 0.00
	6i. Other. Add all other nonpriority unsecured claims. Write that amount here.	6i. \$ 98,906.00
6j. Total Nonpriority. Add lines 6f through 6i.		154,835.00

Fill in this information to identify your case:

Debtor 1	Ashley T Wallace		
	First Name	Middle Name	Last Name
Debtor 2	Sara J Wallace		
(Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	EASTERN DISTRICT OF NORTH CAROLINA		
Case number (if known)			

Check if this is an
amended filing

Official Form 106G**Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

1. Do you have any executory contracts or unexpired leases?

No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.

Yes. Fill in all of the information below even if the contacts of leases are listed on *Schedule A/B: Property* (Official Form 106 A/B).
2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code	State what the contract or lease is for
2.1 Angela Vidal Attorney at Law 201 Strykers Rd Suite 19-155 Phillipsburg, NJ 08865	Attorney representation on the Huntington Learning Centers, Inc vs. Read it, NC, Inc., Wallace Education Holdings, LLC, Sara Wallace, Ashley T. Wallace, Brenda Wallace and Willie T. Wallace, Complaint filed 6/14/2012

Fill in this information to identify your case:

Debtor 1	Ashley T Wallace		
	First Name	Middle Name	Last Name
Debtor 2	Sara J Wallace		
(Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	EASTERN DISTRICT OF NORTH CAROLINA		
Case number (if known)			

Check if this is an amended filing

Official Form 106H Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor.)

No
 Yes

2. Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

No. Go to line 3.
 Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?

3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

Column 1: Your codebtor
Name, Number, Street, City, State and ZIP Code

Column 2: The creditor to whom you owe the debt
Check all schedules that apply:

3.1 **Judith Jones**
10299 Croft Pointe Lane
Leland, NC 28451

Schedule D, line 2.2
 Schedule E/F, line _____
 Schedule G _____
Volkswagen Credit Inc

Check if this is:

- An amended filing
- A supplement showing postpetition chapter 13 income as of the following date:

MM / DD / YYYY

Official Form 106I

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Employment

1. Fill in your employment information.

If you have more than one job, attach a separate page with information about additional employers.

Include part-time, seasonal, or self-employed work.

Occupation may include student or homemaker, if it applies.

Debtor 1	Debtor 2 or non-filing spouse
<input checked="" type="checkbox"/> Employed	<input checked="" type="checkbox"/> Employed
<input type="checkbox"/> Not employed	<input type="checkbox"/> Not employed
Owner	Owner
<u>The Wallaby Group, LLC</u>	<u>Wallace Education Holdings, LLC</u>

How long employed there?

March 2013

10 years

***See Attachment for Additional Employment Information**

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

	For Debtor 1	For Debtor 2 or non-filing spouse
2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.	2. \$ <u>7,349.96</u>	\$ <u>2,051.80</u>
3. Estimate and list monthly overtime pay.	3. +\$ <u>0.00</u>	+\$ <u>0.00</u>
4. Calculate gross Income. Add line 2 + line 3.	4. \$ <u>7,349.96</u>	\$ <u>2,051.80</u>

Debtor 1 **Ashley T Wallace**
Debtor 2 **Sara J Wallace**

Case number (if known) _____

	For Debtor 1	For Debtor 2 or non-filing spouse
4.	\$ 7,349.96	\$ 2,051.80

Copy line 4 here _____

5. List all payroll deductions:

5a. **Tax, Medicare, and Social Security deductions**
 5b. **Mandatory contributions for retirement plans**
 5c. **Voluntary contributions for retirement plans**
 5d. **Required repayments of retirement fund loans**
 5e. **Insurance**
 5f. **Domestic support obligations**
 5g. **Union dues**
 5h. **Other deductions.** Specify: _____

5a.	\$ 678.93	\$ 104.45
5b.	\$ 301.35	\$ 0.00
5c.	\$ 0.00	\$ 0.00
5d.	\$ 0.00	\$ 0.00
5e.	\$ 267.17	\$ 0.00
5f.	\$ 0.00	\$ 0.00
5g.	\$ 0.00	\$ 0.00
5h.+	\$ 0.00	+ \$ 0.00

6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.

6. \$ 1,247.45 \$ 104.45

7. Calculate total monthly take-home pay. Subtract line 6 from line 4.

7. \$ 6,102.51 \$ 1,947.35

8. List all other income regularly received:

8a. **Net income from rental property and from operating a business, profession, or farm**
 Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.
 8a. \$ 0.00 \$ 0.00

8b. **Interest and dividends**
 8b. \$ 0.00 \$ 0.00

8c. **Family support payments that you, a non-filing spouse, or a dependent regularly receive**
 Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.
 8c. \$ 0.00 \$ 0.00

8d. **Unemployment compensation**
 8d. \$ 0.00 \$ 0.00

8e. **Social Security**
 8e. \$ 0.00 \$ 0.00

8f. **Other government assistance that you regularly receive**
 Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.
 Specify: _____
 8f. \$ 0.00 \$ 0.00

8g. **Pension or retirement income**
 8g. \$ 0.00 \$ 0.00

8h. **Other monthly income.** Specify: _____
 8h.+ \$ 0.00 + \$ 0.00

9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.

9. \$ 0.00 \$ 0.00

10. Calculate monthly income. Add line 7 + line 9.

10. \$ 6,102.51 + \$ 1,947.35 = \$ 8,049.86

Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.

11. State all other regular contributions to the expenses that you list in Schedule J.

Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.

Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J.

Specify: _____ 11. +\$ 0.00

12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income.

Write that amount on the *Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data*, if it applies

12. \$ 8,049.86

Combined
monthly income

13. Do you expect an increase or decrease within the year after you file this form?

 No. Yes. Explain: **None Anticipated**

Debtor 1 **Ashley T Wallace**
Debtor 2 **Sara J Wallace**

Case number (if known) _____

Official Form B 6I
Attachment for Additional Employment Information

Debtor	
Occupation	Director of Business Programs
Name of Employer	Brunswick Community College
How long employed	Since January 5, 2015
Address of Employer	
Spouse	
Occupation	?
Name of Employer	Jungle Rapids
How long employed	Part-time June thru August
Address of Employer	

Fill in this information to identify your case:

Debtor 1	Ashley T Wallace
Debtor 2	Sara J Wallace
(Spouse, if filing)	
United States Bankruptcy Court for the:	EASTERN DISTRICT OF NORTH CAROLINA
Case number (If known)	

Check if this is:

An amended filing
 A supplement showing postpetition chapter 13 expenses as of the following date:

MM / DD / YYYY

Official Form 106J

Schedule J: Your Expenses

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Your Household

1. Is this a joint case?

No. Go to line 2.
 Yes. Does Debtor 2 live in a separate household?

 No Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2.2. Do you have dependents? No

Do not list Debtor 1 and Debtor 2.

 Yes. Fill out this information for each dependent.....

Do not state the dependents names.

Dependent's relationship to Debtor 1 or Debtor 2

Dependent's age

Does dependent live with you?

Son**10**

No
 Yes
 No
 Yes
 No
 Yes
 No
 Yes

Son**12**3. Do your expenses include expenses of people other than yourself and your dependents? No
 Yes

Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106I.)

Your expenses

4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.

4. \$ **2,644.74**

If not included in line 4:

4a. Real estate taxes
 4b. Property, homeowner's, or renter's insurance
 4c. Home maintenance, repair, and upkeep expenses
 4d. Homeowner's association or condominium dues
 5. Additional mortgage payments for your residence, such as home equity loans

4a. \$	0.00
4b. \$	0.00
4c. \$	270.00
4d. \$	0.00
5. \$	0.00

Debtor 1 **Ashley T Wallace**
Debtor 2 **Sara J Wallace**

Case number (if known) _____

6. Utilities:	6a. Electricity, heat, natural gas	6a. \$ 537.00
	6b. Water, sewer, garbage collection	6b. \$ 152.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c. \$ 456.00
	6d. Other. Specify: _____	6d. \$ 0.00
7. Food and housekeeping supplies	7. \$ 1,232.00	
8. Childcare and children's education costs	8. \$ 0.00	
9. Clothing, laundry, and dry cleaning	9. \$ 100.00	
10. Personal care products and services	10. \$ 60.00	
11. Medical and dental expenses	11. \$ 40.00	
12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12. \$ 400.00	
13. Entertainment, clubs, recreation, newspapers, magazines, and books	13. \$ 135.00	
14. Charitable contributions and religious donations	14. \$ 200.00	
15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.	15a. Life insurance	15a. \$ 0.00
	15b. Health insurance	15b. \$ 0.00
	15c. Vehicle insurance	15c. \$ 200.00
	15d. Other insurance. Specify: _____	15d. \$ 0.00
16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: Real Estate/Personal Property	16. \$ 200.00	
17. Installment or lease payments:	17a. Car payments for Vehicle 1	17a. \$ 336.00
	17b. Car payments for Vehicle 2	17b. \$ 0.00
	17c. Other. Specify: _____	17c. \$ 0.00
	17d. Other. Specify: _____	17d. \$ 0.00
18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18. \$ 0.00	
19. Other payments you make to support others who do not live with you. Specify: _____	\$ 0.00	
20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.	19.	
20a. Mortgages on other property	20a. \$ 0.00	
20b. Real estate taxes	20b. \$ 0.00	
20c. Property, homeowner's, or renter's insurance	20c. \$ 60.00	
20d. Maintenance, repair, and upkeep expenses	20d. \$ 270.00	
20e. Homeowner's association or condominium dues	20e. \$ 0.00	
21. Other: Specify: HLC Legal Case	21. +\$ 600.00	
Pets/Vets	+\$ 40.00	
School Lunches/Expenses/Activities	+\$ 100.00	
Ph.d. Program with travel	+\$ 1,100.00	
Student Loans	+\$ 504.00	
22. Calculate your monthly expenses	\$ 9,636.74	
22a. Add lines 4 through 21.	\$ 9,636.74	
22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	\$ 9,636.74	
22c. Add line 22a and 22b. The result is your monthly expenses.	\$ 9,636.74	
23. Calculate your monthly net income.	23a. \$ 8,049.86	
23b. Copy your monthly expenses from line 22c above.	23b. -\$ 9,636.74	
23c. Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i> .	23c. \$ -1,586.88	
24. Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?		
<input checked="" type="checkbox"/> No.		
<input type="checkbox"/> Yes.	Explain here: None Anticipated	

Fill in this information to identify your case:

Debtor 1	Ashley T Wallace		
	First Name	Middle Name	Last Name
Debtor 2	Sara J Wallace		
(Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <u>EASTERN DISTRICT OF NORTH CAROLINA</u>			
Case number (if known) _____			

Check if this is an amended filing

Official Form 106Sum**Summary of Your Assets and Liabilities and Certain Statistical Information**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Part 1: Summarize Your Assets

		Your assets Value of what you own
1.	Schedule A/B: Property (Official Form 106A/B)	\$ 490,000.00
1a.	Copy line 55, Total real estate, from Schedule A/B.....	\$ 490,000.00
1b.	Copy line 62, Total personal property, from Schedule A/B.....	\$ 63,153.51
1c.	Copy line 63, Total of all property on Schedule A/B.....	\$ 553,153.51

Part 2: Summarize Your Liabilities

		Your liabilities Amount you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)	\$ 620,721.40
2a.	Copy the total you listed in Column A, <i>Amount of claim</i> , at the bottom of the last page of Part 1 of <i>Schedule D</i> ...	\$ 620,721.40
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)	\$ 23,565.52
3a.	Copy the total claims from Part 1 (priority unsecured claims) from line 6e of <i>Schedule E/F</i>	\$ 23,565.52
3b.	Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of <i>Schedule E/F</i>	\$ 154,835.00
		Your total liabilities \$ 799,121.92

Part 3: Summarize Your Income and Expenses

4.	Schedule I: Your Income (Official Form 106I)	\$ 8,049.86
	Copy your combined monthly income from line 12 of <i>Schedule I</i>	\$ 8,049.86
5.	Schedule J: Your Expenses (Official Form 106J)	\$ 9,636.74
	Copy your monthly expenses from line 22c of <i>Schedule J</i>	\$ 9,636.74

Part 4: Answer These Questions for Administrative and Statistical Records**6. Are you filing for bankruptcy under Chapters 7, 11, or 13?**

No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Yes

7. What kind of debt do you have?

Your debts are primarily consumer debts. *Consumer debts* are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Debtor 1 **Ashley T Wallace**
Debtor 2 **Sara J Wallace**

Case number (if known) _____

8. **From the Statement of Your Current Monthly Income:** Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. \$ _____9. **Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:**

From Part 4 on Schedule E/F, copy the following:	Total claim
9a. Domestic support obligations (Copy line 6a.)	\$ <u>0.00</u>
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$ <u>23,565.52</u>
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$ <u>0.00</u>
9d. Student loans. (Copy line 6f.)	\$ <u>55,929.00</u>
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$ <u>0.00</u>
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	\$ <u>0.00</u>
9g. Total. Add lines 9a through 9f.	\$ <u>79,494.52</u>

Fill in this information to identify your case:

Debtor 1	Ashley T Wallace		
	First Name	Middle Name	Last Name
Debtor 2	Sara J Wallace		
(Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	EASTERN DISTRICT OF NORTH CAROLINA		
Case number (if known)			

Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

 Sign Below

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?

No

Yes. Name of person

Attach *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119)

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

/s/ Ashley T Wallace

Ashley T Wallace
Signature of Debtor 1

Date February 17, 2016

/s/ Sara J Wallace

Sara J Wallace
Signature of Debtor 2

Date February 17, 2016

In re Ashley T Wallace
Sara J Wallace

Case No. _____

Debtor(s) _____

DECLARATION CONCERNING DEBTOR'S SCHEDULES
Attachment A

Inclusion of any debt listed on Schedules D, E or F shall not be construed as an admission as to it's validity including but not limited to the propriety/amount of charges/fees, interest rate or standing to assert a claim based on the alleged debt.

United States Bankruptcy Court
Eastern District of North Carolina

In re **Ashley T Wallace**
Sara J Wallace

Debtor(s)

Case No.

Chapter

11

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)

1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept	\$ 10,240.00
Prior to the filing of this statement I have received	\$ 10,240.00
Balance Due	\$ 0.00

2. \$ **1,717.00** of the filing fee has been paid.

3. The source of the compensation paid to me was:

Debtor Other (specify):

4. The source of compensation to be paid to me is:

Debtor Other (specify): **To be determined based upon court approval**

5. I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.

6. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;
- c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
- d. Representation of the debtor in adversary proceedings and other contested bankruptcy matters;
- e. [Other provisions as needed]

7. By agreement with the debtor(s), the above-disclosed fee does not include the following service:

Refer to attorney fee contract attached hereto. (Chapter 13 Cases only)

Representation of debtors in an adversary proceeding or other contested bankruptcy matters. (Chapter 7 cases only)

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

February 17, 2016
Date

/s/ Jonathan E. Friesen

Jonathan E. Friesen 31535

Signature of Attorney

Gillespie & Murphy PA

P.O. Drawer 888

New Bern, NC 28563

(252) 636-2225 Fax: (252) 636-0625

gmpa@lawyersforchrist.com

Name of law firm

**United States Bankruptcy Court
Eastern District of North Carolina**

In re **Ashley T Wallace
Sara J Wallace**

Debtor(s)

Case No.

Chapter **11**

VERIFICATION OF CREDITOR MATRIX

The above-named Debtors hereby verify that the attached list of creditors is true and correct to the best of their knowledge.

Date: **February 17, 2016**

/s/ Ashley T Wallace

Ashley T Wallace

Signature of Debtor

Date: **February 17, 2016**

/s/ Sara J Wallace

Sara J Wallace

Signature of Debtor

Date: **February 17, 2016**

/s/ Jonathan E. Friesen

Signature of Attorney

Jonathan E. Friesen 31535

Gillespie & Murphy PA

P.O. Drawer 888

New Bern, NC 28563

(252) 636-2225 Fax: (252) 636-0625

Afni, Inc.
Attn: Managing Agent
P O Box 3097
Bloomington, IL 61702

Citibank/The Home Depot
Attn: Managing Agent
Po Box 790040
Saint Louis, MO 63179

Goodyear/cbna
Attn: Managing Agent
P O Box 6497
Sioux Falls, SD 57117

Andrew Bielfuss
Quarles & Brady LLP
411 E Wisconsin Ave Ste 2040
Milwaukee, WI 53202-4497

CitiCards CBNA
Attn: Managing Agent
P O Box 6241
Sioux Falls, SD 57117

Huntington Learning Center
Attn: Managing Agent
496 Kindekamack Rd
Oradell, NJ 07649

Angela Vidal
Attorney at Law
201 Strykers Rd
Suite 19-155
Phillipsburg, NJ 08865

College Foundation Inc
Attn: Managing Agent
2917 Highwoods Blvd
Raleigh, NC 27604

IRS
Attn: Managing Agent
PO Box 7346
Philadelphia, PA 19101-7346

Bank of America
Attn: Officer
P O Box 982235
El Paso, TX 79998

Dept of Ed/PHEAA
Attn: Managing Agent
P O Box 530210
Atlanta, GA 30353-0210

IRS
Attn: Managing Agent
PO Box 7317
Philadelphia, PA 19101-7317

Bank of Ozarks
Attn: Officer/Managing Agent
P O Box 196
Ozark, AR 72949

Duke University
Attn: Managing Agent
2106 Campus Dr
Durham, NC 27708

Jim Emmerson
Chief Financial Officer
496 Kindermack Rd
Oradell, NJ 07649

BB&T
Attn: Jack Hayes
P.O. Box 1847
Wilson, NC 27894-1847

Fed Loan Serv
Attn: Managing Agent
P O Box 60610
Harrisburg, PA 17106

Judith Jones
10299 Croft Pointe Lane
Leland, NC 28451

Brunswick Co. Tax Collec
Attn: Managing Agent
P O Box 29
Bolivia, NC 28422

Fed Loan Serv
Attn: Managing Agent
P O Box 60610
Harrisburg, PA 17106

Larry Coats
Coats & Bennet, PLLC
1400 Crescent Green, Ste 300
Cary, NC 27518

Cameron Management, Inc.
Attn: Managing Agent
1201 Glen Meade Rd
Wilmington, NC 28401

Fed Loan Serv
Attn: Managing Agent
P O Box 606010
Harrisburg, PA 17106

Mark Carter
Morgan & Carter, PLLC
602 Market St
Wilmington, NC 28401

Certegy
Attn: Managing Agent
P O Box 30046
Tampa, FL 33630

GE Capital Bank
Attn: Managing Agent
120 Corporate Blvd Ste 1
Norfolk, VA 23502

Midland Funding
Attn: Managing Agent
2365 Northside Drive
San Diego, CA 92108

Midland Funding
Attn: Managing Agent
8875 Aero Dr Ste 200
San Diego, CA 92123

Suntrust Bank
Attn: Officer
7455 Chancellor Dr
Orlando, FL 32809

Watauga County Tax Collector
Attn: Managing Agent
842 W King St
Boone, NC 28607

Navient
Attn: Managing Agent
P O Box 9500
Wilkes Barre, PA 18773

Time Payment Corp
Attn: Managing Agent
P o Box 3069
Woburn, MA 01888-1969

Wells Fargo
Attn: Officer
P O Box 60510
Los Angeles, CA 90060

Nc Dept of Revenue
Attn: Managing Agent
P O Box 1168
Raleigh, NC 27602

Timepayment Corp Llc
Attn: Managing Agent
16 New England Exe Office Park S
Burlington, MA 01803

Wells Fargo
Attn: Officer
P O Box 10335
Des Moines, IA 50306

New Centre Drive, LLC
Attn: Managing Agent
1201 Glen Meade Rd
Wilmington, NC 28401

Town of Beech Mountain tax
Attn: Managing Agent
403 Beech Mountain Pkwy
Beech Mountain, NC 28604-8012

Wells Fargo Bank
Attn: Officer
P O Box 14517
Des Moines, IA 50306

New Hanover Regional Med Center
Attention: Managing Agent
PO Box 70826
Charlotte, NC 28272

US Securities and Exchange
Commision Securities & Exchange
950 East Paces Ferry Rd, NE Ste 900
Atlanta, GA 30326-1382

Wells Fargo Hm Mortgag
Attn: Officer
8480 Stagecoach Cir
Frederick, MD 21701

Paragon Revenue Group
Attn: Managing Agent
P O Box 126
Concord, NC 28026

Usaa Savings Bank
Attn: Officer
P O Box 47504
San Antonio, TX 78265

Portfolio Recovery Asst
Attn: Managing Agent
287 Independence
Virginia Beach, VA 23462

Verizon
Attn: Managing Agent
500 Technology Dr Ste 550
Weldon Spring, MO 63304

Sams Club / GEMB
Attn: Managing Agent
Po Box 103104
Roswell, GA 30076

Verizon Wireless
Attn: Managing Agent
1 Verizon Place
Alpharetta, GA 30004

Secretary of Treasury
Attn: Managing Agent
1500 Pennsylvania Ave NW
Washington, DC 20220

Volkswagon Credit Inc
National Bankruptcy Services
9441 Lbj Freeway, Suite 250
Dallas, TX 75241